

EXHIBIT 3

**[REDACTED EXHIBIT 3 TO
DECLARATION OF CARI DAWSON]**

State Farm Life Insurance Co.
3001 8th Ave
GREELEY CO 80638-0001
Telephone (970)395-6268

POLICY NUMBER

LF-1853-4088

Annual Notice of Policy Status

PLEASE PAY THIS AMOUNT

NONE

INSURED

WILLIAM T WHITMAN

WILLIAM T WHITMAN

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POLICY DATE INFORMATION - Your policy is dated January 16, 2001. This notice provides information from January 16, 2001, to January 16, 2002.

PAYMENT INFORMATION - No amount is due. Your monthly payments of \$175.00 are made on the State Farm Payment Plan. Any payment received after January 15, 2002, is not reflected on this notice.

Continued planned payments of \$175.00 each month will provide coverage until July 15, 2045, based on guaranteed rates and until the policy anniversary when the insured is age 100, January 16, 2081, based on current rates.

If no further payments are made, your policy will provide coverage until February 14, 2003, based on guaranteed rates; and until November 15, 2003, based on current rates.

INSURANCE INFORMATION

Insurance Amount

Universal Life

\$500,000.00

COST OF INSURANCE

Insurance Cost

Universal Life

\$539.22

ACCOUNT VALUE

	Increase	Decrease	Balance
Beginning Balance			.00
Payments	2,275.00		
Interest Credited	40.86		
Expense Charges		173.75	
Cost of Insurance		539.22	
Balance as of Jan. 8, 2002			1,602.89
Interest to Be Earned Jan. 16, 2002	6.88		
Total			1,609.77

INTEREST RATE - The account value currently earns 5.75% except the account value equal to any policy loan earns 5%. From May 16, 2001 to November 15, 2001, the current interest rate was 5%. From January 16, 2001 to May 15, 2001, the current interest rate was 5.25%. The interest rates are effective annual interest rates.

SURRENDER VALUE - The surrender value as of January 16, 2002, will be \$949.77. The total account value has been reduced by the surrender charge of \$660.00 to determine the surrender value.

All amounts shown are subject to verification.
See reverse side for important information.

Thanks for letting us serve you . . .

W.P. 3/1/21

William Whitman
Defendant's

11

Prepared JAN 15 2002

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT

PLEASE RETURN THIS PART WITH YOUR
CHECK MADE PAYABLE TO STATE FARM

INSURED WILLIAM T WHITMAN

PLEASE PAY THIS AMOUNT

POLICY NUMBER LF-1853-4088

NONE

Your cancelled check is your receipt. Any check, draft, or money order is received subject to collection.

State Farm Insurance Companies
3001 8th Ave
GREELEY CO 80638-0001

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ANNUAL CONTACT

LIFE

0115

DEFENDANT'S
EXHIBIT

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Information continued for policy LF-1853-4088
Prepared January 15, 2002

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: THOMAS H WHITMAN
Successor: PATRICIA A WHITMAN

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

FINANCIAL TRANSACTIONS - Activity for Year Ending January 8, 2002

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Beginning Balance					.00
01162001	151.00	7.55	-	-	143.45
01162001	-	5.00	41.78	-	96.67
01242001	24.00	1.20	-	-	119.47
01242001	175.00	8.75	-	-	285.72
02162001	-	5.00	45.28	1.17	236.61
02222001	175.00	8.75	-	-	402.86
03162001	-	5.00	45.27	1.83	354.42
04092001	175.00	8.75	-	-	520.67
04162001	-	5.00	45.25	1.96	472.38
05082001	175.00	8.75	-	-	638.63
05162001	-	5.00	45.24	2.59	590.98
06082001	175.00	8.75	-	-	757.23
06162001	-	5.00	45.23	3.06	710.06
07092001	175.00	8.75	-	-	876.31
07162001	-	5.00	45.22	3.62	829.71
08082001	175.00	8.75	-	-	995.96
08162001	-	5.00	45.21	4.22	949.97
09102001	175.00	8.75	-	-	1,116.22
09162001	-	5.00	45.20	4.75	1,070.77
10082001	175.00	8.75	-	-	1,237.02
10162001	-	5.00	45.19	5.40	1,192.23
11082001	175.00	8.75	-	-	1,358.48
11162001	-	5.00	45.18	5.99	1,314.29
12102001	175.00	8.75	-	-	1,480.54
12162001	-	5.00	45.17	6.27	1,436.64
01082002	175.00	8.75	-	-	1,602.89

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT. IF THIS IS NOT CONVENIENT, PLEASE COMPLETE THE FOLLOWING.

Street or Rural Route			Residence Phone Number	
City	State/Province	ZIP/Postal Code	Business Phone Number	
Township	County	<input type="checkbox"/> Inside City Limits	<input type="checkbox"/> Outside City Limits	

Is change: ☐ Permanent ☐ Temporary If temporary, how many months? _____ Do you plan to return to your previous address? ☐ Yes ☐ No

☐ Mailing address change only ☐ Location change (Please see your State Farm Agent)

(Auto Policyholders Only)

Is the vehicle driven to and from work/school? ☐ Yes ☐ No

If the answer is "yes", what is the average weekly mileage for such use? _____

297-727-1 08-31-2007 (L0500B)

State Farm Life Insurance Co.
3001 8th Ave
GREELEY CO 80638-0001
Telephone (970)395-6268

POLICY NUMBER

LF-1853-4088

Annual Notice of Policy Status

PLEASE PAY THIS AMOUNT

NONE

INSURED

WILLIAM T WHITMAN

WILLIAM T WHITMAN



POLICY DATE INFORMATION - Your policy is dated January 16, 2001. This notice provides information from January 16, 2002, to January 16, 2003.

PAYMENT INFORMATION - No amount is due. Your monthly payments of \$175.00 are made on the State Farm Payment Plan. Any payment received after January 15, 2003, is not reflected on this notice.

Continued planned payments of \$175.00 each month will provide coverage until November 15, 2045, based on guaranteed rates and until the policy anniversary when the insured is age 100, January 16, 2081, based on current rates.

If no further payments are made, your policy will provide coverage until January 15, 2006, based on guaranteed rates; and until September 14, 2008, based on current rates.

INSURANCE INFORMATION

Insurance Amount

Universal Life

\$500,000.00

COST OF INSURANCE

Insurance Cost

Universal Life

\$542.31

ACCOUNT VALUE

Balance from 2002 Annual Notice

Increase

Decrease

Balance

Payments

2,100.00

Interest Credited

112.51

Expense Charges

165.00

Cost of Insurance

542.31

Balance as of Jan. 8, 2003

3,114.97

Interest to Be Earned Jan. 16, 2003

12.76

Total

3,127.73

INTEREST RATE - The account value currently earns 5.25% except the account value equal to any policy loan earns 6%. From September 16, 2002 to December 15, 2002, the current interest rate was 5.5%. From January 16, 2002 to September 15, 2002, the current interest rate was 5.75%. The interest rates are effective annual interest rates.

Thanks for letting us serve you . . .

All amounts shown are subject to verification.
See reverse side for important information.



Prepared JAN 15 2003

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT

INSURED WILLIAM T WHITMAN

POLICY NUMBER LF-1853-4088

PLEASE RETURN THIS PART WITH YOUR
CHECK MADE PAYABLE TO STATE FARM

PLEASE PAY THIS AMOUNT

NONE

Your cancelled check is your receipt. Any check, draft, or money order is received subject to collection.

State Farm Insurance Companies
3001 8th Ave
GREELEY CO 80638-0001



ANNUAL CONTACT

LIFE

0115

Information continued for policy LF-1853-4088
Prepared January 15, 2003

SURRENDER VALUE - The surrender value as of January 16, 2003, will be \$2,467.73. The total account value has been reduced by the surrender charge of \$660.00 to determine the surrender value.

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: THOMAS H WHITMAN
Successor: PATRICIA A WHITMAN

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

FINANCIAL TRANSACTIONS - Activity for Year Ending January 8, 2003

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance from 2002 Annual Notice					1,609.77
01162002	-	5.00	45.26	-	1,559.51
02082002	175.00	8.75	-	-	1,725.76
02162002	-	5.00	45.24	7.46	1,682.98
03082002	175.00	8.75	-	-	1,849.23
03162002	-	5.00	45.23	8.05	1,807.05
04082002	175.00	8.75	-	-	1,973.30
04162002	-	5.00	45.22	8.61	1,931.69
05082002	175.00	8.75	-	-	2,097.94
05162002	-	5.00	45.21	9.20	2,056.93
06102002	175.00	8.75	-	-	2,223.18
06162002	-	5.00	45.20	9.73	2,182.71
07082002	175.00	8.75	-	-	2,348.96
07162002	-	5.00	45.19	10.37	2,309.14
08082002	175.00	8.75	-	-	2,475.39
08162002	-	5.00	45.18	10.96	2,436.17
09092002	175.00	8.75	-	-	2,602.42
09162002	-	5.00	45.16	11.53	2,563.79
10082002	175.00	8.75	-	-	2,730.04
10162002	-	5.00	45.15	11.64	2,691.53
11082002	175.00	8.75	-	-	2,857.78
11162002	-	5.00	45.14	12.20	2,819.84
12092002	175.00	8.75	-	-	2,986.09
12162002	-	5.00	45.13	12.76	2,948.72
01082003	175.00	8.75	-	-	3,114.97

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT. IF THIS IS NOT CONVENIENT, PLEASE COMPLETE THE FOLLOWING.

Street or Rural Route			Residence Phone Number	
City	State/Province	ZIP/Postal Code	Business Phone Number	
Township	County	<input type="checkbox"/> Inside City Limits	<input type="checkbox"/> Outside City Limits	

Is change: ☐ Permanent ☐ Temporary If temporary, how many months? _____ Do you plan to return to your previous address? ☐ Yes ☐ No

☐ Mailing address change only ☐ Location change (Please see your State Farm Agent)

(Auto Policyholders Only)

Is the vehicle driven to and from work/school? ☐ Yes ☐ No

If the answer is "yes", what is the average weekly mileage for such use? _____

297-727-1 08-31-2007 (L0500B)

State Farm Life Insurance Co.
1555 Promontory Cir
GREELEY CO 80638-0001
Telephone (970)395-6363

POLICY NUMBER

LF-1853-4088

Annual Notice of Policy Status

PLEASE PAY THIS AMOUNT


NONE

00000001

INSURED

WILLIAM T WHITMAN

WILLIAM T WHITMAN



POLICY DATE INFORMATION - Your policy is dated January 16, 2001. This notice provides information from January 16, 2003, to January 16, 2004.

PAYMENT INFORMATION - No amount is due. Your monthly payments of \$175.00 are made on the State Farm Payment Plan. Any payment received after January 15, 2004, is not reflected on this notice.

Continued planned payments of \$175.00 each month will provide coverage until April 16, 2044, based on guaranteed rates and until the policy anniversary when the insured is age 100, January 16, 2081, based on current rates.

If no further payments are made, your policy will provide coverage until June 15, 2005, based on guaranteed rates; and until June 15, 2006, based on current rates.

INSURANCE INFORMATION

Insurance Amount

Universal Life

\$497,000.00

COST OF INSURANCE

Insurance Cost

Universal Life

\$542.41

ACCOUNT VALUE

Balance from 2003 Annual Notice

Increase

Decrease

Balance

Payments

2,100.00

Interest Credited

141.90

Expense Charges

165.00

Cost of Insurance

542.41

Withdrawals

3,000.00

Balance as of Jan. 8, 2004

1,662.22

Interest to Be Earned Jan. 16, 2004

6.25

Total

1,668.47

INTEREST RATE - The account value currently earns 5% except the account value equal to any policy loan earns 6%. From January 16, 2003 to December 15, 2003, the current interest rate was 5.25%. The interest rates are effective annual interest rates.

Thanks for letting us serve you . . .

All amounts shown are subject to verification.
See reverse side for important information.



Prepared JAN 15 2004

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT

INSURED WILLIAM T WHITMAN

POLICY NUMBER LF-1853-4088

PLEASE RETURN THIS PART WITH YOUR
CHECK MADE PAYABLE TO STATE FARM

PLEASE PAY THIS AMOUNT

NONE

Your cancelled check is your receipt. Any check, draft, or money order is received subject to collection.

State Farm Insurance Companies
1555 Promontory Cir
GREELEY CO 80638-0001



ANNUAL CONTACT

LIFE

0115

Information continued for policy LF-1853-4088
Prepared January 15, 2004

SURRENDER VALUE - The surrender value as of January 16, 2004, will be \$1,090.97. The total account value has been reduced by the surrender charge of \$577.50 to determine the surrender value.

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: THOMAS H WHITMAN
Successor: PATRICIA A WHITMAN

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

FINANCIAL TRANSACTIONS - Activity for Year Ending January 8, 2004

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance from 2003 Annual Notice					3,127.73
01162003	-	5.00	45.27	-	3,077.46
02102003	175.00	8.75	-	-	3,243.71
02162003	-	5.00	45.25	13.26	3,206.72
03102003	175.00	8.75	-	-	3,372.97
03162003	-	5.00	45.24	13.83	3,336.56
04082003	175.00	8.75	-	-	3,502.81
04162003	-	5.00	45.23	14.42	3,467.00
05082003	175.00	8.75	-	-	3,633.25
05162003	-	5.00	45.22	14.98	3,598.01
06092003	175.00	8.75	-	-	3,764.26
06162003	-	5.00	45.21	15.51	3,729.56
07082003	175.00	8.75	-	-	3,895.81
07162003	-	5.00	45.19	16.10	3,861.72
08082003	175.00	8.75	-	-	4,027.97
08162003	-	5.00	45.18	16.66	3,994.45
09082003	175.00	8.75	-	-	4,160.70
09162003	-	5.00	45.17	17.23	4,127.76
09232003	(3,000.00)	-	-	-	1,127.76
10082003	175.00	8.75	-	-	1,294.01
10162003	-	5.00	45.16	8.40	1,252.25
11102003	175.00	8.75	-	-	1,418.50
11162003	-	5.00	45.15	5.47	1,373.82
12082003	175.00	8.75	-	-	1,540.07
12162003	-	5.00	45.14	6.04	1,495.97
01082004	175.00	8.75	-	-	1,662.22

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT. IF THIS IS NOT CONVENIENT, PLEASE COMPLETE THE FOLLOWING.

Street or Rural Route			Residence Phone Number	
City	State/Province	ZIP/Postal Code	Business Phone Number	
Township	County	<input type="checkbox"/> Inside City Limits	<input type="checkbox"/> Outside City Limits	

Is change: ☐ Permanent ☐ Temporary If temporary, how many months? _____ Do you plan to return to your previous address? ☐ Yes ☐ No

☐ Mailing address change only ☐ Location change (Please see your State Farm Agent)

(Auto Policyholders Only)

Is the vehicle driven to and from work/school? ☐ Yes ☐ No

If the answer is "yes", what is the average weekly mileage for such use? _____

297-727-1 08-31-2007 (L0500B)

State Farm Life Insurance Co.
1555 Promontory Circle
GREELEY CO 80638-0001
Telephone (970)395-4096

POLICY NUMBER

LF-1853-4088

Payment Notice

PLEASE PAY THIS AMOUNT

\$35.95

00000001

INSURED

WILLIAM T WHITMAN

WILLIAM T WHITMAN

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POLICY DATE INFORMATION - Your policy is dated January 16, 2001.
This notice provides information from January 16, 2004, to
January 16, 2005.

PAYMENT INFORMATION - The amount due is \$35.95. This is the amount
of your loan interest. Your monthly payments of \$175.00 are made on
the State Farm Payment Plan. Any payment received after January 15,
2005, is not reflected on this notice.

If you continue monthly planned premium payments of \$175.00, coverage
will be provided until April 16, 2044, based on guaranteed rates; and
until August 15, 2074, based on current rates. Dates assume loan
interest is paid in cash when notified loan interest is due.

If you make no further premium payments, coverage will be provided
until November 15, 2005, based on guaranteed rates; and until
August 15, 2006, based on current rates. Dates assume loan interest
is paid in cash when notified loan interest is due.

If you make a payment of at least \$184.24 plus \$35.95 due for loan
interest, coverage will be provided until January 16, 2006, based on
guaranteed rates. Dates assume loan interest is paid in cash when
notified loan interest is due.

INSURANCE INFORMATION

Insurance Amount

Universal Life

\$497,000.00

COST OF INSURANCE

Insurance Cost

Universal Life

\$543.12

ACCOUNT VALUE

Balance from 2004 Annual Notice

Increase

Decrease

Balance
1,668.47

Payments

2,100.00

Interest Credited

104.59

Expense Charges

165.00

Cost of Insurance

543.12

Balance as of Jan. 10, 2005

3,164.94

Interest to Be Earned Jan. 16, 2005

13.71

Total

3,178.65

Thanks for letting us serve you . . .

All amounts shown are subject to verification.
See reverse side for important information.



1215201494

Prepared JAN 15 2005

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT

INSURED WILLIAM T WHITMAN

POLICY NUMBER LF-1853-4088

PLEASE RETURN THIS PART WITH YOUR
CHECK MADE PAYABLE TO STATE FARM

PLEASE PAY THIS AMOUNT

\$35.95

Your cancelled check is your receipt. Any check, draft, or money order is received subject to collection.

2009000009
State Farm Insurance Companies
PO Box 53983
PHOENIX AZ 85072-3983

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I175.00
35.95

ANNUAL CONTACT

LIFE

35.95

0115

101234500003595 812341853408810220>

Information continued for policy LF-1853-4088
Prepared January 15, 2005

INTEREST RATE - The account value currently earns 4.75% except the account value equal to any policy loan earns 6%. From January 16, 2004 to December 15, 2004, the current interest rate was 5%. The interest rates are effective annual interest rates.

SURRENDER VALUE - The surrender value as of January 16, 2005, will be \$647.70. The total account value has been reduced by the surrender charge of \$495.00, policy loan of \$2,000.00 and loan interest of \$35.95 to determine the surrender value.

LOAN INFORMATION - Your policy loan is \$2,000.00. This balance does not include the \$35.95 loan interest due. The current interest rate on this loan is 8%.

	Increase	Decrease	Loan Balance
Beginning Balance			\$.00
Additional Loans	2,000.00		
Ending Balance			\$2,000.00

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: THOMAS H WHITMAN
Successor: PATRICIA A WHITMAN

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

FINANCIAL TRANSACTIONS - Activity for Year Ending January 10, 2005

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance from 2004 Annual Notice					1,668.47
01162004	-	5.00	45.32	-	1,618.15
02092004	175.00	8.75	-	-	1,784.40
02162004	-	5.00	45.31	6.72	1,740.81
03082004	175.00	8.75	-	-	1,907.06
03162004	-	5.00	45.30	7.26	1,864.02
04082004	175.00	8.75	-	-	2,030.27
04162004	-	5.00	45.29	7.75	1,987.73
05102004	175.00	8.75	-	-	2,153.98
05162004	-	5.00	45.28	8.21	2,111.91
06082004	175.00	8.75	-	-	2,278.16
06162004	-	5.00	45.27	8.76	2,236.65
07082004	175.00	8.75	-	-	2,402.90
07162004	-	5.00	45.25	9.27	2,361.92
08092004	175.00	8.75	-	-	2,528.17
08162004	-	5.00	45.24	9.75	2,487.68
09082004	175.00	8.75	-	-	2,653.93
09162004	-	5.00	45.23	10.29	2,613.99
10082004	175.00	8.75	-	-	2,780.24
10162004	-	5.00	45.22	10.81	2,740.83
10262004	-	-	-	-	2,740.83
11082004	175.00	8.75	-	-	2,907.08
11162004	-	5.00	45.21	12.34	2,869.21
12082004	175.00	8.75	-	-	3,035.46
12162004	-	5.00	45.20	13.43	2,998.69
01102005	175.00	8.75	-	-	3,164.94
01152005	-	-	-	-	3,164.94

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT. IF THIS IS NOT CONVENIENT, PLEASE COMPLETE THE FOLLOWING.

Street or Rural Route			Residence Phone Number	
City	State/Province	ZIP/Postal Code	Business Phone Number	
Township	County	<input type="checkbox"/> Inside City Limits	<input type="checkbox"/> Outside City Limits	

Is change: ☐ Permanent ☐ Temporary If temporary, how many months? _____ Do you plan to return to your previous address? ☐ Yes ☐ No

☐ Mailing address change only ☐ Location change (Please see your State Farm Agent)

(Auto Policyholders Only)

Is the vehicle driven to and from work/school? ☐ Yes ☐ No

If the answer is "yes", what is the average weekly mileage for such use? _____

297-727-1 08-31-2007 (L0500B)

State Farm Life Insurance Co.
1555 Promontory Circle
GREELEY CO 80638-0001
Telephone (970)395-4096

POLICY NUMBER
LF-1853-4088

Payment Notice

PLEASE PAY THIS AMOUNT
\$162.88

00000001

INSURED
WILLIAM T WHITMAN

WILLIAM T WHITMAN

|||||

POLICY DATE INFORMATION - Your policy is dated January 16, 2001. This notice provides information from January 16, 2005, to January 16, 2006.

PAYMENT INFORMATION - The amount due is \$162.88. This is the amount of your loan interest. Your monthly payments of \$175.00 are made on the State Farm Payment Plan. Any payment received after January 14, 2006, is not reflected on this notice.

If you continue monthly planned premium payments of \$175.00, coverage will be provided until July 15, 2044, based on guaranteed rates; and until August 15, 2070, based on current rates. Dates assume loan interest is paid in cash when notified loan interest is due.

If you make no further premium payments, coverage will be provided until June 15, 2009, based on guaranteed rates; and until January 15, 2012, based on current rates. Dates assume loan interest is paid in cash when notified loan interest is due.

INSURANCE INFORMATION

Insurance Amount

Universal Life

\$497,000.00

COST OF INSURANCE

Insurance Cost

Universal Life

\$544.37

ACCOUNT VALUE

	Increase	Decrease	Balance
Balance from 2005 Annual Notice			3,178.65
Payments	2,100.00		
Interest Credited	185.21		
Expense Charges		165.00	
Cost of Insurance		544.37	
Balance as of Jan. 9, 2006			4,754.49
Interest to Be Earned Jan. 16, 2006	19.41		
Total			4,773.90

INTEREST RATE - The account value currently earns 4.5% except the account value equal to any policy loan earns 6%. From January 16, 2005 to December 15, 2005, the current interest rate was 4.75%. The interest rates are effective annual interest rates.

(Page 1 of 2)

Thanks for letting us serve you . . .

All amounts shown are subject to verification.
See reverse side for important information.

1211871713
Prepared JAN 14 2006

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT

INSURED WILLIAM T WHITMAN

POLICY NUMBER LF-1853-4088

PLEASE RETURN THIS PART WITH YOUR
CHECK MADE PAYABLE TO STATE FARM

PLEASE PAY THIS AMOUNT

\$162.88

Your cancelled check is your receipt. Any check, draft, or money order is received subject to collection.

2009000009
State Farm Insurance Companies
PO Box 53983
PHOENIX AZ 85072-3983

|||||

UL 175.00
I 162.88

ANNUAL CONTACT

LIFE 162.88 0114

201234500016288 812341853408810220>

Information continued for policy LF-1853-4088
Prepared January 14, 2006

SURRENDER VALUE - The surrender value as of January 16, 2006, will be \$2,162.57. The total account value has been reduced by the surrender charge of \$412.50, policy loan of \$2,035.95 and loan interest of \$162.88 to determine the surrender value.

LOAN INFORMATION - Your policy loan is \$2,035.95. This balance does not include the \$162.88 loan interest due. The current interest rate on this loan is 8%.

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: THOMAS H WHITMAN
Successor: PATRICIA A WHITMAN

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

FINANCIAL TRANSACTIONS - Activity for Year Ending January 9, 2006

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance from 2005 Annual Notice					3,178.65
01162005	-	5.00	45.43	-	3,128.22
02082005	175.00	8.75	-	-	3,294.47
02162005	-	5.00	45.42	14.29	3,258.34
03082005	175.00	8.75	-	-	3,424.59
03162005	-	5.00	45.41	14.81	3,388.99
04082005	175.00	8.75	-	-	3,555.24
04162005	-	5.00	45.39	15.30	3,520.15
05092005	175.00	8.75	-	-	3,686.40
05162005	-	5.00	45.38	15.79	3,651.81
06082005	175.00	8.75	-	-	3,818.06
06162005	-	5.00	45.37	16.32	3,784.01
07082005	175.00	8.75	-	-	3,950.26
07162005	-	5.00	45.36	16.83	3,916.73
08082005	175.00	8.75	-	-	4,082.98
08162005	-	5.00	45.35	17.34	4,049.97
09082005	175.00	8.75	-	-	4,216.22
09162005	-	5.00	45.33	17.86	4,183.75
10102005	175.00	8.75	-	-	4,350.00
10162005	-	5.00	45.32	18.34	4,318.02
11082005	175.00	8.75	-	-	4,484.27
11162005	-	5.00	45.31	18.90	4,452.86
12082005	175.00	8.75	-	-	4,619.11
12162005	-	5.00	45.30	19.43	4,588.24
01092006	175.00	8.75	-	-	4,754.49
01152006	-	-	-	-	4,754.49

(Page 2 of 2)

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT. IF THIS IS NOT CONVENIENT, PLEASE COMPLETE THE FOLLOWING.

Street or Rural Route			Residence Phone Number	
City	State/Province	ZIP/Postal Code	Business Phone Number	
Township	County	<input type="checkbox"/> Inside City Limits	<input type="checkbox"/> Outside City Limits	

Is change: ☐ Permanent ☐ Temporary If temporary, how many months? _____ Do you plan to return to your previous address? ☐ Yes ☐ No

☐ Mailing address change only ☐ Location change (Please see your State Farm Agent)

(Auto Policyholders Only)

Is the vehicle driven to and from work/school? ☐ Yes ☐ No

If the answer is "yes", what is the average weekly mileage for such use? _____

297-727-1 08-31-2007 (L0500B)

SFLIC-W-0000207178

Information continued for policy LF-1853-4088
Prepared January 15, 2007

SURRENDER VALUE - The surrender value as of January 15, 2007, will be \$1,599.67. The total account value has been reduced by the surrender charge of \$330.00, policy loan of \$4,209.66 and loan interest of \$326.62 to determine the surrender value.

LOAN INFORMATION - Your policy loan is \$4,209.66. This balance does not include the \$326.62 loan interest due. The current interest rate on this loan is 8%.

	Increase	Decrease	Loan Balance
Beginning Balance			\$2,198.83
Additional Loans	2,005.91		
Interest at 8%	4.92		
Ending Balance			\$4,209.66

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: THOMAS H WHITMAN
Successor: PATRICIA A WHITMAN

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

FINANCIAL TRANSACTIONS - Activity for Year Ending January 8, 2007

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance from 2006 Annual Notice					4,773.90
01162006	-	5.00	45.58	-	4,723.32
01272006	-	-	-	-	4,723.32
02082006	175.00	8.75	-	-	4,889.57
02162006	-	5.00	45.56	21.59	4,860.60
03082006	175.00	8.75	-	-	5,026.85
03162006	-	5.00	45.55	23.04	4,999.34
04102006	175.00	8.75	-	-	5,165.59
04162006	-	5.00	45.54	23.49	5,138.54
05082006	175.00	8.75	-	-	5,304.79
05162006	-	5.00	45.53	24.05	5,278.31
06082006	175.00	8.75	-	-	5,444.56
06162006	-	5.00	45.51	24.56	5,418.61
07102006	175.00	8.75	-	-	5,584.86
07162006	-	5.00	45.50	25.04	5,559.40
08082006	175.00	8.75	-	-	5,725.65
08162006	-	5.00	45.49	25.59	5,700.75
09082006	175.00	8.75	-	-	5,867.00
09162006	-	5.00	45.47	26.11	5,842.64
10092006	175.00	8.75	-	-	6,008.89
10162006	-	5.00	45.46	26.61	5,985.04
11082006	175.00	8.75	-	-	6,151.29
11162006	-	5.00	45.45	27.15	6,127.99
12082006	175.00	8.75	-	-	6,294.24
12162006	-	5.00	45.43	27.68	6,271.49
01082007	175.00	8.75	-	-	6,437.74
01152007	-	-	-	-	6,437.74

(Page 2 of 2)

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT. IF THIS IS NOT CONVENIENT, PLEASE COMPLETE THE FOLLOWING.

Street or Rural Route			Residence Phone Number	
City	State/Province	ZIP/Postal Code	Business Phone Number	
Township	County	<input type="checkbox"/> Inside City Limits	<input type="checkbox"/> Outside City Limits	

Is change: ☐ Permanent ☐ Temporary If temporary, how many months? _____ Do you plan to return to your previous address? ☐ Yes ☐ No

☐ Mailing address change only ☐ Location change (Please see your State Farm Agent)

(Auto Policyholders Only)

Is the vehicle driven to and from work/school? ☐ Yes ☐ No

If the answer is "yes", what is the average weekly mileage for such use? _____

297-727-1 08-31-2007 (L0500B)

SFLIC-W-0000207180

Information continued for policy LF-1853-4088
Prepared January 15, 2008

SURRENDER VALUE - The surrender value as of January 15, 2008, will be \$3,090.94. The total account value has been reduced by the surrender charge of \$247.50, policy loan of \$4,536.28 and loan interest of \$362.90 to determine the surrender value.

LOAN INFORMATION - Your policy loan is \$4,536.28. This balance does not include the \$362.90 loan interest due. The current interest rate on this loan is 8%.

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: THOMAS H WHITMAN
Successor: PATRICIA A WHITMAN

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

FINANCIAL TRANSACTIONS - Activity for Year Ending January 8, 2008

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance from 2007 Annual Notice					6,465.95
01162007	-	5.00	45.76	-	6,415.19
02082007	175.00	8.75	-	-	6,591.44
02162007	-	5.00	45.75	29.12	6,559.81
03082007	175.00	8.75	-	-	6,726.06
03162007	-	5.00	45.74	29.67	6,704.99
04092007	175.00	8.75	-	-	6,871.24
04162007	-	5.00	45.72	30.17	6,850.69
05082007	175.00	8.75	-	-	7,016.94
05162007	-	5.00	45.71	30.73	6,996.96
06082007	175.00	8.75	-	-	7,163.21
06162007	-	5.00	45.69	31.26	7,143.78
07092007	175.00	8.75	-	-	7,310.03
07162007	-	5.00	45.68	31.78	7,291.13
08082007	175.00	8.75	-	-	7,457.38
08162007	-	5.00	45.67	32.34	7,439.05
09102007	175.00	8.75	-	-	7,605.30
09162007	-	5.00	45.65	32.85	7,587.50
10082007	175.00	8.75	-	-	7,753.75
10162007	-	5.00	45.64	33.44	7,736.55
11082007	175.00	8.75	-	-	7,902.80
11162007	-	5.00	45.62	33.98	7,886.16
12102007	175.00	8.75	-	-	8,052.41
12162007	-	5.00	45.61	34.49	8,036.29
01082008	175.00	8.75	-	-	8,202.54
01152008	-	-	-	-	8,202.54

(Page 2 of 2)

When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT. IF THIS IS NOT CONVENIENT, PLEASE COMPLETE THE FOLLOWING.

Street or Rural Route			Residence Phone Number	
City	State/Province	ZIP/Postal Code	Business Phone Number	
Township	County	<input type="checkbox"/> Inside City Limits	<input type="checkbox"/> Outside City Limits	

Is change: ☐ Permanent ☐ Temporary If temporary, how many months? _____ Do you plan to return to your previous address? ☐ Yes ☐ No

☐ Mailing address change only ☐ Location change (Please see your State Farm Agent)

(Auto Policyholders Only)

Is the vehicle driven to and from work/school? ☐ Yes ☐ No

If the answer is "yes", what is the average weekly mileage for such use? _____

297-727-1 08-31-2007 (L0500B)

SFLIC-W-0000207182

Information continued for policy LF-1853-4088
Prepared January 15, 2009

SURRENDER VALUE - The surrender value as of January 15, 2009, will be \$4,635.68. The total account value has been reduced by the surrender charge of \$165.00, policy loan of \$4,899.18 and loan interest of \$391.93 to determine the surrender value.

LOAN INFORMATION - Your policy loan is \$4,899.18. This balance does not include the \$391.93 loan interest due. The current interest rate on this loan is 8%.

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: THOMAS H WHITMAN
Successor: PATRICIA A WHITMAN

Note: A change in marital status could necessitate a new beneficiary designation. Please contact your agent if your marital status has changed.

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

FINANCIAL TRANSACTIONS - Activity for Year Ending January 8, 2009

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance from 2008 Annual Notice					8,237.62
01162008	-	5.00	45.99	-	8,186.63
02082008	175.00	8.75	-	-	8,352.88
02162008	-	5.00	45.97	36.07	8,337.98
03102008	175.00	8.75	-	-	8,504.23
03162008	-	5.00	45.96	36.59	8,489.86
04082008	175.00	8.75	-	-	8,656.11
04162008	-	5.00	45.94	37.18	8,642.35
05082008	175.00	8.75	-	-	8,808.60
05162008	-	5.00	45.93	37.75	8,795.42
06092008	175.00	8.75	-	-	8,961.67
06162008	-	5.00	45.91	38.28	8,949.04
06302008	175.00	8.75	-	-	9,115.29
07162008	-	5.00	45.90	39.04	9,103.43
08082008	175.00	8.75	-	-	9,269.68
08162008	-	5.00	45.89	39.43	9,258.22
09082008	175.00	8.75	-	-	9,424.47
09162008	-	5.00	45.87	40.00	9,413.60
10082008	175.00	8.75	-	-	9,579.85
10162008	-	5.00	45.86	40.58	9,569.57
11102008	175.00	8.75	-	-	9,735.82
11162008	-	5.00	45.84	41.11	9,726.09
12082008	175.00	8.75	-	-	9,892.34
12162008	-	5.00	45.83	41.73	9,883.24
01082009	175.00	8.75	-	-	10,049.49
01152009	-	-	-	-	10,049.49

(Page 2 of 2)

When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT. IF THIS IS NOT CONVENIENT, PLEASE COMPLETE THE FOLLOWING.

Street or Rural Route			Residence Phone Number	
City	State/Province	ZIP/Postal Code	Business Phone Number	
Township	County	<input type="checkbox"/> Inside City Limits	<input type="checkbox"/> Outside City Limits	
Is change: <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary			If temporary, how many months? _____	
			Do you plan to return to your previous address? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Mailing address change only			<input type="checkbox"/> Location change (Please see your State Farm Agent)	
(Auto Policyholders Only)				
Is the vehicle driven to and from work/school? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If the answer is "yes", what is the average weekly mileage for such use? _____				

297-727-1 08-31-2007 (L0500B)

State Farm Life Insurance Co.
1555 Promontory Circle
GREELEY CO 80638-0001
Telephone (970)395-4094

POLICY NUMBER
LF-1853-4088

Payment Notice

PLEASE PAY THIS AMOUNT
\$423.29

E0000001
WILLIAM T WHITMAN

INSURED
WILLIAM T WHITMAN

|||||

POLICY DATE INFORMATION - Your policy is dated January 16, 2001.
This notice provides information from January 16, 2009, to
January 16, 2010.

PAYMENT INFORMATION - The amount due is \$423.29. This is the amount
of your loan interest. Your monthly payments of \$175.00 are made on
the State Farm Payment Plan. Any payment received after January 15,
2010, is not reflected on this notice.

If you continue monthly planned premium payments of \$175.00, coverage
will be provided until February 14, 2045, based on guaranteed rates;
and until December 15, 2069, based on current rates. Dates assume
loan interest is paid in cash when notified loan interest is due.

If you make no further premium payments, coverage will be provided
until August 15, 2019, based on guaranteed rates; and until
December 15, 2029, based on current rates. Dates assume loan
interest is paid in cash when notified loan interest is due.

INSURANCE INFORMATION

Insurance Amount

Universal Life \$497,000.00

COST OF INSURANCE

Insurance Cost

Universal Life \$553.97

ACCOUNT VALUE

	Increase	Decrease	Balance
Balance from 2009 Annual Notice			10,091.79
Payments	2,100.00		
Interest Credited	509.11		
Expense Charges		165.00	
Cost of Insurance		553.97	
Balance as of Jan. 8, 2010			11,981.93
Interest to Be Earned Jan. 16, 2010	48.56		
Total			12,030.49

INTEREST RATE - The account value currently earns 4.25% except the
account value equal to any policy loan earns 6%. From January 16, 2009
to December 15, 2009, the current interest rate was 4.5%. The interest
rates are effective annual interest rates.

(Page 1 of 2)

Thanks for letting us serve you . . .

All amounts shown are subject to verification.
See reverse side for important information.

Agent: TIM CRABTREE

1216920277

Telephone: (425) 747-3600

Prepared JAN 15 2010

State Farm Life Insurance Co (Not Licensed in MA, NY, or WV) / State Farm Life and Accident Assurance Co (Licensed in NY and WV)

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT

PLEASE RETURN THIS PART WITH YOUR
CHECK MADE PAYABLE TO STATE FARM

INSURED WILLIAM T WHITMAN

PLEASE PAY THIS AMOUNT

POLICY NUMBER LF-1853-4088

\$423.29

Your cancelled check is your receipt. Any check, draft, or money order is received subject to collection.

2009000009
State Farm Insurance Companies
PO Box 680003
DALLAS TX 75368-0003

|||||

UL 175.00
I 423.29

ANNUAL CONTACT

LIFE 423.29 0115

101234500042329 812341853408810220>

Information continued for policy LF-1853-4088
Prepared January 15, 2010

SURRENDER VALUE - The surrender value as of January 16, 2010, will be \$6,233.59. The total account value has been reduced by the surrender charge of \$82.50, policy loan of \$5,291.11 and loan interest of \$423.29 to determine the surrender value.

LOAN INFORMATION - Your policy loan is \$5,291.11. This balance does not include the \$423.29 loan interest due. The current interest rate on this loan is 8%.

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: THOMAS H WHITMAN
Successor: PATRICIA A WHITMAN

Note: A change in marital status could necessitate a new beneficiary designation. Please contact your agent if your marital status has changed.

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by calling your agent at (425) 747-3600, or by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

FINANCIAL TRANSACTIONS - Activity for Year Ending January 8, 2010

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance from 2009 Annual Notice					10,091.79
01162009	-	5.00	46.25	-	10,040.54
02092009	175.00	8.75	-	-	10,206.79
02162009	-	5.00	46.23	43.33	10,198.89
03092009	175.00	8.75	-	-	10,365.14
03162009	-	5.00	46.22	43.92	10,357.84
04082009	175.00	8.75	-	-	10,524.09
04162009	-	5.00	46.20	44.51	10,517.40
05082009	175.00	8.75	-	-	10,683.65
05162009	-	5.00	46.19	45.10	10,677.56
06082009	175.00	8.75	-	-	10,843.81
06162009	-	5.00	46.17	45.69	10,838.33
07082009	175.00	8.75	-	-	11,004.58
07162009	-	5.00	46.16	46.28	10,999.70
08102009	175.00	8.75	-	-	11,165.95
08162009	-	5.00	46.14	46.83	11,161.64
09082009	175.00	8.75	-	-	11,327.89
09162009	-	5.00	46.13	47.47	11,324.23
10082009	175.00	8.75	-	-	11,490.48
10162009	-	5.00	46.11	48.07	11,487.44
11092009	175.00	8.75	-	-	11,653.69
11162009	-	5.00	46.09	48.64	11,651.24
12082009	175.00	8.75	-	-	11,817.49
12162009	-	5.00	46.08	49.27	11,815.68
01082010	175.00	8.75	-	-	11,981.93
01152010	-	-	-	-	11,981.93

(Page 2 of 2)

When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT. IF THIS IS NOT CONVENIENT, PLEASE COMPLETE THE FOLLOWING.

Street or Rural Route			Residence Phone Number	
City	State/Province	ZIP/Postal Code	Business Phone Number	
Township	County	<input type="checkbox"/> Inside City Limits	<input type="checkbox"/> Outside City Limits	

Is change: ☐ Permanent ☐ Temporary If temporary, how many months? _____ Do you plan to return to your previous address? ☐ Yes ☐ No

☐ Mailing address change only ☐ Location change (Please see your State Farm Agent)

(Auto Policyholders Only)

Is the vehicle driven to and from work/school? ☐ Yes ☐ No

If the answer is "yes", what is the average weekly mileage for such use? _____

297-727-1 08-31-2007 (L0500B)

State Farm Life Insurance Co.
1555 Promontory Circle
GREELEY CO 80638-0001
Telephone (970)395-4094

POLICY NUMBER
LF-1853-4088

Payment Notice

PLEASE PAY THIS AMOUNT
\$873.47

Z0000001
WILLIAM T WHITMAN

INSURED
WILLIAM T WHITMAN

|||||

POLICY DATE INFORMATION - Your policy is dated January 16, 2001.
This notice provides information from January 16, 2010, to
January 16, 2011.

PAYMENT INFORMATION - The amount due is \$873.47. This is the amount
of your loan interest. Your monthly payments of \$175.00 are made on
the State Farm Payment Plan. Any payment received after January 15,
2011, is not reflected on this notice.

If you continue monthly planned premium payments of \$175.00, coverage
will be provided until September 14, 2044, based on guaranteed rates;
and until August 15, 2066, based on current rates. Dates assume loan
interest is paid in cash when notified loan interest is due.

If you make no further premium payments, coverage will be provided
until December 15, 2015, based on guaranteed rates; and until
February 14, 2031, based on current rates. Dates assume loan
interest is paid in cash when notified loan interest is due.

INSURANCE INFORMATION

Insurance Amount

Universal Life \$497,000.00

COST OF INSURANCE

Insurance Cost

Universal Life \$558.05

ACCOUNT VALUE

	Increase	Decrease	Balance
Balance from 2010 Annual Notice			12,030.49
Payments	2,100.00		
Interest Credited	659.14		
Expense Charges		165.00	
Cost of Insurance		558.05	
Balance as of Jan. 10, 2011			14,066.58
Interest to Be Earned Jan. 16, 2011	63.49		
Total			14,130.07

INTEREST RATE - The account value currently earns 4% except the account
value equal to any policy loan earns 6%. From January 16, 2010 to
June 15, 2010, the current interest rate was 4.25%. The interest rates
are effective annual interest rates.

(Page 1 of 2)

Thanks for letting us serve you . . .

All amounts shown are subject to verification.
See reverse side for important information.

Agent: TIM CRABTREE

1212754103

Telephone: (425) 747-3600

Prepared JAN 15 2011

State Farm Life Insurance Co (Not Licensed in MA, NY, or WI) / State Farm Life and Accident Assurance Co (Licensed in NY and WI)

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT

PLEASE RETURN THIS PART WITH YOUR
CHECK MADE PAYABLE TO STATE FARM

INSURED WILLIAM T WHITMAN

PLEASE PAY THIS AMOUNT

POLICY NUMBER LF-1853-4088

\$873.47

Your cancelled check is your receipt. Any check, draft, or money order is received subject to collection.

2009000009
State Farm Insurance Companies
PO Box 680001
DALLAS TX 75368-0001

|||||

UL 175.00
I 873.47

ANNUAL CONTACT

LIFE 873.47 0115

201234500087347 812341853408810220>

Information continued for policy LF-1853-4088
Prepared January 15, 2011

SURRENDER VALUE - The surrender value as of January 16, 2011, will be \$2,030.57. The total account value has been reduced by the surrender charge of \$.00, policy loan of \$11,226.03 and loan interest of \$873.47 to determine the surrender value.

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: STEPHANIE ALICE WHITMAN
Successor: THOMAS HENRY WHITMAN (FATHER), RANDALL DEAN MAY

Note: A change in marital status could necessitate a new beneficiary designation. Please contact your agent if your marital status has changed.

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by calling your agent at (425) 747-3600, or by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

LOAN INFORMATION - Your policy loan is \$11,226.03. This balance does not include the \$873.47 loan interest due. The current interest rate on this loan is 8%.

Date	Increase	Repayment	Interest	Decrease	Balance
01-26-2010	5,511.63		11.63		11,226.03
Totals	5,511.63		11.63		

FINANCIAL TRANSACTIONS - Activity for Year Ending January 10, 2011

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance from 2010 Annual Notice					12,030.49
01-16-2010	-	5.00	46.60	-	11,978.89
02-08-2010	175.00	8.75	-	-	12,145.14
02-16-2010	-	5.00	46.58	54.67	12,148.23
03-08-2010	175.00	8.75	-	-	12,314.48
03-16-2010	-	5.00	46.56	57.99	12,320.91
04-08-2010	175.00	8.75	-	-	12,487.16
04-16-2010	-	5.00	46.55	58.58	12,494.19
05-10-2010	175.00	8.75	-	-	12,660.44
05-16-2010	-	5.00	46.53	59.15	12,668.06
06-08-2010	175.00	8.75	-	-	12,834.31
06-16-2010	-	5.00	46.51	59.78	12,842.58
07-08-2010	175.00	8.75	-	-	13,008.83
07-16-2010	-	5.00	46.50	60.06	13,017.39
08-09-2010	175.00	8.75	-	-	13,183.64
08-16-2010	-	5.00	46.48	60.61	13,192.77
09-08-2010	175.00	8.75	-	-	13,359.02
09-16-2010	-	5.00	46.46	61.21	13,368.77
10-08-2010	175.00	8.75	-	-	13,535.02
10-16-2010	-	5.00	46.44	61.79	13,545.37
11-08-2010	175.00	8.75	-	-	13,711.62
11-16-2010	-	5.00	46.43	62.36	13,722.55
12-08-2010	175.00	8.75	-	-	13,888.80
12-16-2010	-	5.00	46.41	62.94	13,900.33
01-10-2011	175.00	8.75	-	-	14,066.58

(Page 2 of 2)

When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.



State Farm Life Insurance Co.
5400 New Albany Road East
NEW ALBANY OH 43054-8861
Telephone (614)775-7909

POLICY NUMBER
LF-1853-4088

Payment Notice

PLEASE PAY THIS AMOUNT
\$967.96

E0000001
WILLIAM T WHITMAN

INSURED
WILLIAM T WHITMAN



POLICY DATE INFORMATION - Your policy is dated January 16, 2001.
This notice provides information from January 16, 2011, to
January 16, 2012.

PAYMENT INFORMATION - The amount due is \$967.96. This is the amount
of your loan interest. Your monthly payments of \$175.00 are made on
the State Farm Payment Plan. Any payment received after January 14,
2012, is not reflected on this notice.

If you continue monthly planned premium payments of \$175.00, coverage
will be provided until November 15, 2044, based on guaranteed rates;
and until June 15, 2065, based on current rates. Dates assume loan
interest is paid in cash when notified loan interest is due.

If you make no further premium payments, coverage will be provided
until January 15, 2019, based on guaranteed rates; and until
February 14, 2035, based on current rates. Dates assume loan
interest is paid in cash when notified loan interest is due.

INSURANCE INFORMATION

Insurance Amount

Universal Life \$497,000.00

COST OF INSURANCE

Insurance Cost

Universal Life \$561.89

ACCOUNT VALUE

	Increase	Decrease	Balance
Balance from 2011 Annual Notice			14,130.07
Payments	2,100.00		
Interest Credited	753.13		
Expense Charges		165.00	
Cost of Insurance		561.89	
Balance as of Jan. 9, 2012			16,256.31
Interest to Be Earned Jan. 16, 2012	72.06		
Total			16,328.37

INTEREST RATE - The account value currently earns 4% except the account
value equal to any policy loan earns 6%. The interest rates are
effective annual interest rates.

(Page 1 of 2)

Thanks for letting us serve you . . .

All amounts shown are subject to verification.
See reverse side for important information.

Agent: TIM CRABTREE

1218385943

Telephone: (425) 747-3600

Prepared JAN 14 2012

State Farm Life Insurance Co (Not Licensed in MA, NY, or WV) / State Farm Life and Accident Assurance Co (Licensed in NY and WV)

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT

PLEASE RETURN THIS PART WITH YOUR
CHECK MADE PAYABLE TO STATE FARM

INSURED WILLIAM T WHITMAN

PLEASE PAY THIS AMOUNT

POLICY NUMBER LF-1853-4088

\$967.96

Your cancelled check is your receipt. Any check, draft, or money order is received subject to collection.

1609000004
State Farm Insurance Companies
PO Box 588002
DULUTH GA 30029-8002
[Barcode]

UL 175.00
I 967.96

ANNUAL CONTACT

LIFE 967.96 0114

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Information continued for policy LF-1853-4088
Prepared January 14, 2012

SURRENDER VALUE - The surrender value as of January 16, 2012, will be \$3,260.91. The total account value has been reduced by the surrender charge of \$.00, policy loan of \$12,099.50 and loan interest of \$967.96 to determine the surrender value.

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: STEPHANIE ALICE WHITMAN
Successor: THOMAS HENRY WHITMAN (FATHER), RANDALL DEAN MAY

Note: A change in marital status could necessitate a new beneficiary designation. Please contact your agent if your marital status has changed.

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by calling your agent at (425) 747-3600, or by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

LOAN INFORMATION - Your policy loan is \$12,099.50. This balance does not include the \$967.96 loan interest due. The current interest rate on this loan is 8%.

FINANCIAL TRANSACTIONS - Activity for Year Ending January 9, 2012

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance from 2011 Annual Notice					14,130.07
01-16-2011	-	5.00	46.92	-	14,078.15
02-08-2011	175.00	8.75	-	-	14,244.40
02-16-2011	-	5.00	46.90	65.50	14,258.00
03-08-2011	175.00	8.75	-	-	14,424.25
03-16-2011	-	5.00	46.89	66.10	14,438.46
04-08-2011	175.00	8.75	-	-	14,604.71
04-16-2011	-	5.00	46.87	66.68	14,619.52
05-09-2011	175.00	8.75	-	-	14,785.77
05-16-2011	-	5.00	46.85	67.25	14,801.17
06-08-2011	175.00	8.75	-	-	14,967.42
06-16-2011	-	5.00	46.83	67.85	14,983.45
07-08-2011	175.00	8.75	-	-	15,149.70
07-16-2011	-	5.00	46.82	68.46	15,166.34
08-08-2011	175.00	8.75	-	-	15,332.59
08-16-2011	-	5.00	46.80	69.06	15,349.85
09-08-2011	175.00	8.75	-	-	15,516.10
09-16-2011	-	5.00	46.78	69.66	15,533.98
10-10-2011	175.00	8.75	-	-	15,700.23
10-16-2011	-	5.00	46.76	70.23	15,718.70
11-09-2011	175.00	8.75	-	-	15,884.95
11-16-2011	-	5.00	46.74	70.85	15,904.06
12-08-2011	175.00	8.75	-	-	16,070.31
12-16-2011	-	5.00	46.73	71.48	16,090.06
01-09-2012	175.00	8.75	-	-	16,256.31

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(Page 2 of 2)

When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.





State Farm Regional Office
5400 New Albany Road East
NEW ALBANY OH 43054-8861
Phone: 614-775-7909

L000032
WILLIAM T WHITMAN



Annual Notice

Policy Number: LF-1853-4088
Plan: Universal Life
Insured: WILLIAM T WHITMAN
Payment Amount: \$1,045.40

Agent Tim Crabtree
1 Lake Bellevue Dr Ste 102
Bellevue, WA 98005-2417
Phone: 425-747-3600

Important Next Steps

- Review this document closely to make sure this policy continues to meet your needs.
- Detach the bottom portion of this page and return it with your payment, or be a *Green Neighbor™* and pay your bill on-line.
- Universal Life policies are flexible and change from year to year based on interest rates, payments, and other factors. Contact your State Farm agent to review your policy and options available to you.

Thanks for letting us serve you!

Policy # LF-1853-4088

Page 1 of 6

Prepared January 15, 2013

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Your Way**



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PC or
mobile devices



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Pocket Agent app



Mail
Send us
a check



Call your Agent: 425-747-3600
Automated Line: 1-800-440-0998
Key code: 1213853350



Walk In
See your
State Farm Agent



Insured: WILLIAM T WHITMAN
Policy Number: LF-1853-4088

Payment Amount: \$1,045.40
Make payment to State Farm

1609000004
Insurance Support Center
PO Box 588002
DULUTH GA 30029-8002



Office Use Only

Annual Notice

Life

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Policy Information

Policy Number
LF-1853-4088

Insured
WILLIAM T WHITMAN

Policy Date
January 16, 2001

Plan
Universal Life

Payment Information

\$1,045.40. This is the amount of loan interest due. Monthly payments of \$175.00 are made via the State Farm Payment Plan.

Any payment received after January 15, 2013, is not reflected on this notice.

This notice reflects activity from January 16, 2012, to January 16, 2013.

Beneficiary Information

The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: STEPHANIE ALICE WHITMAN

Successor: THOMAS HENRY WHITMAN (FATHER), RANDALL DEAN MAY

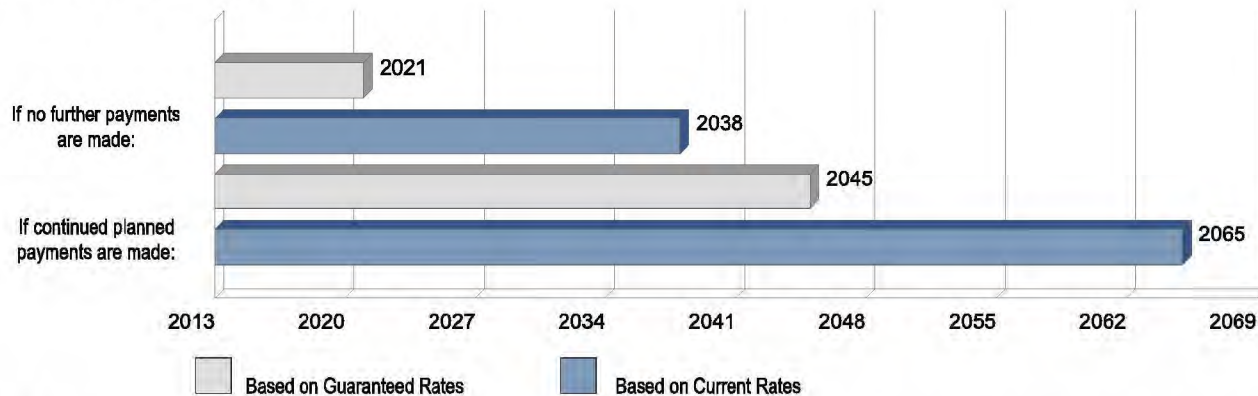
Note: A change in marital status could necessitate a new beneficiary designation. Please contact your agent if your marital status has changed.

Insurance Information

Insurance Amount	Insured
Universal Life	\$497,000.00
Cost of Insurance	
Universal Life	\$562.15



End of Coverage Projection



If no further payments are made, your policy will provide coverage until December 15, 2021, when the insured's age is 40, based on guaranteed rates, and until July 15, 2038, when the insured's age is 57, based on current rates.

If continued planned payments of \$175.00 each month are made, your policy will provide coverage until January 15, 2045, when the insured's age is 63, based on guaranteed rates, and until August 15, 2065, when the insured's age is 84, based on current rates.

This information assumes loan interest is paid when due.

The age(s) shown above are based on the insured's age as of the policy anniversary preceding the projected coverage end date.

Account Value

Balance from 2012 Annual Notice	\$16,328.37
Increases	
Payments	2,100.00
Interest Credited	850.24
Interest to be Earned January 16, 2013	81.14
Decreases	
Expense Charges	- 165.00
Cost of Insurance	- 562.15
Total Account Value as of January 16, 2013	\$18,632.60
Loan Balance*	\$13,067.46

*Loan Balance does not include the \$1,045.40 loan interest due. The current interest rate on this loan is 8%.

Interest Rate — The account value currently earns 4% except the account value equal to any policy loan earns 6%. The interest rates are effective annual interest rates.

Surrender Value as of January 16, 2013, will be \$4,519.74. The total account value has been reduced by the surrender charge of \$0.00, policy loan of \$13,067.46, and loan interest of \$1,045.40 to determine the surrender value.

Note: If you request to surrender your policy, it cannot be reinstated.

Transaction details are provided in the Account Value Transactions portion of this notice.

Account Value Transactions

Date	Payments/ (Withdrawals)	Interest Credited	Expense Charges	Cost of Insurance	Ending Account Value
Balance from 2012 Annual Notice					\$16,328.37
01-16-2012	-	-	5.00	46.95	16,276.42
02-08-2012	175.00	-	8.75	-	16,442.67
02-16-2012	-	74.24	5.00	46.93	16,464.98
03-08-2012	175.00	-	8.75	-	16,631.23
03-16-2012	-	74.86	5.00	46.91	16,654.18
04-09-2012	175.00	-	8.75	-	16,820.43
04-16-2012	-	75.45	5.00	46.89	16,843.99
05-08-2012	175.00	-	8.75	-	17,010.24
05-16-2012	-	76.10	5.00	46.87	17,034.47
06-08-2012	175.00	-	8.75	-	17,200.72
06-16-2012	-	76.72	5.00	46.85	17,225.59
07-09-2012	175.00	-	8.75	-	17,391.84
07-16-2012	-	77.33	5.00	46.84	17,417.33
08-08-2012	175.00	-	8.75	-	17,583.58
08-16-2012	-	77.97	5.00	46.82	17,609.73
09-16-2012	-	78.48	5.00	46.81	17,636.40
10-04-2012	175.00	-	8.75	-	17,802.65
10-15-2012	175.00	-	8.75	-	17,968.90
10-16-2012	-	78.76	5.00	46.78	17,995.88
11-08-2012	175.00	-	8.75	-	18,162.13
11-16-2012	-	79.86	5.00	46.76	18,190.23
12-10-2012	175.00	-	8.75	-	18,356.48
12-16-2012	-	80.47	5.00	46.74	18,385.21
01-08-2013	175.00	-	8.75	-	18,551.46
Totals	\$2,100.00	\$850.24	\$165.00	\$562.15	\$18,551.46*

* Does not reflect interest to be earned January 16, 2013.

Information and Services

- If you have moved, please contact your State Farm Agent or visit statefarm.com[®] to change your address.
- All amounts shown are subject to verification.
- When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.
- Under the tax law, certain events during the life of a life insurance policy may be taxable to the policyowner. The following may result in taxable income: partial withdrawals, policy surrenders, lapses, assignments, as well as loans from policies that are MECs (Modified Endowment Contracts). If an event is taxable, generally the amount the policyowner is taxed on is the "gain" in the policy. The gain usually is the policy's account value less the premiums paid. Once a taxable gain is reported, it cannot be changed. Please contact your tax advisor for additional information.

Continued on next page



Information and Services (Continued)

- The following disclosure is required under New Hampshire law:

Any of the following actions related to your life insurance policy may have significant future financial, tax or other implications:

- a. Surrender of the policy;
- b. Lapse of the policy;
- c. Failure to pay premium;
- d. Application of the equity of the policy toward payment of premium;
- e. Application of accumulated dividends toward payment of premium;
- f. Financing premium payments;
- g. Sale of the policy; and
- h. Assignment of the policy and any right under the policy.

Before you act, you need to consider all options carefully and seek advice from a licensed financial advisor, attorney or other professional who can explain all available options and consequences.

- **IMPORTANT POLICY OWNER NOTICE** - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by calling your agent at 425-747-3600, by calling State Farm Insurance at 614-775-7909, or by writing to the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

State Farm Life Insurance Company (Not Licensed in MA, NY, or WI)
State Farm Life and Accident Assurance Company (Licensed in NY and WI)
Bloomington, IL



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State Farm Regional Office
5400 New Albany Road East
NEW ALBANY OH 43054-8861
Phone: 614-775-7909

L000042
WILLIAM T WHITMAN



Annual Notice

Policy Number: LF-1853-4088
Plan: Universal Life
Insured: WILLIAM T WHITMAN
Payment Amount: \$1,129.03

Agent Tim Crabtree
1 Lake Bell Dr Ste 102
Bellevue, WA 98005-2417
Phone: 425-747-3600

Important Next Steps

- Review this document closely to make sure this policy continues to meet your needs.
- Detach the bottom portion of this page and return it with your payment, or be a *Green Neighbor™* and pay your bill on-line.
- Universal Life policies are flexible and change from year to year based on interest rates, payments, and other factors. Contact your State Farm agent to review your policy and options available to you.

Thanks for letting us serve you!

1004428 142542 202 01-31-2013 RN40

Policy # LF-1853-4088

Page 1 of 6

Prepared January 15, 2014

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mobile devices



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Pocket Agent app



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a check



Call your Agent: 425-747-3600
Automated Line: 1-800-440-0998
Key code: 1219250014



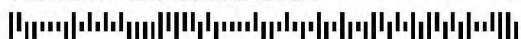
Walk In
See your
State Farm Agent



Insured: WILLIAM T WHITMAN
Policy Number: LF-1853-4088

Payment Amount: \$1,129.03
Make payment to State Farm

1609000004
Insurance Support Center
PO Box 588002
DULUTH GA 30029-8002



Office Use Only	Annual Notice	Life	1,129.03	0115
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Policy Information

Policy Number
LF-1853-4088

Insured
WILLIAM T WHITMAN

Policy Date
January 16, 2001

Plan
Universal Life

Payment Information

\$1,129.03. This is the amount of loan interest due. Monthly payments of \$175.00 are made via the State Farm Payment Plan.

Any payment received after January 15, 2014, is not reflected on this notice.

This notice reflects activity from January 16, 2013, to January 16, 2014.

Beneficiary Information

The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: STEPHANIE ALICE WHITMAN

Successor: THOMAS HENRY WHITMAN (FATHER), RANDALL DEAN MAY

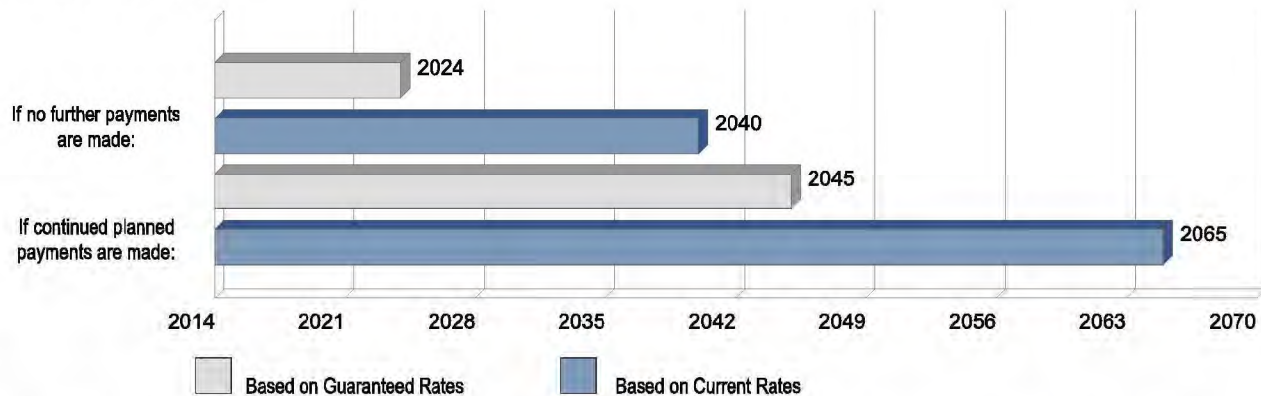
Note: A change in marital status could necessitate a new beneficiary designation. Please contact your agent if your marital status has changed.

Insurance Information

Insurance Amount	Insured
Universal Life	\$497,000.00
Cost of Insurance	
Universal Life	\$563.95



Coverage Projection



If no further payments are made, your policy will provide coverage until January 15, 2024, when the insured's age is 42, based on guaranteed rates, and until December 15, 2040, when the insured's age is 59, based on current rates.

If continued planned payments of \$175.00 each month are made, your policy will provide coverage until February 14, 2045, when the insured's age is 64, based on guaranteed rates, and until October 15, 2065, when the insured's age is 84, based on current rates.

The age(s) shown above are based on the insured's age as of the policy anniversary preceding the projected coverage end date.

This information assumes loan interest is paid when due.

Account Value

Balance from 2013 Annual Notice	\$18,632.60
Increases	
Payments	2,100.00
Interest Credited	952.70
Interest to be Earned January 16, 2014	90.66
Decreases	
Expense Charges	- 165.00
Cost of Insurance	- 563.95
Total Account Value as of January 16, 2014	\$21,047.01
Loan Balance*	\$14,112.86

*Loan Balance does not include the \$1,129.03 loan interest due. The current interest rate on this loan is 8%.

Interest Rate — The account value currently earns 4% except the account value equal to any policy loan earns 6%. The interest rates are effective annual interest rates.

Surrender Value as of January 16, 2014, will be \$5,805.12. The total account value has been reduced by the surrender charge of \$0.00, policy loan of \$14,112.86, and loan interest of \$1,129.03 to determine the surrender value.

Note: If you request to surrender your policy, it cannot be reinstated.

Transaction details are provided in the Account Value Transactions portion of this notice.

Account Value Transactions

Date	Payments/ (Withdrawals)	Interest Credited	Expense Charges	Cost of Insurance	Ending Account Value
Balance from 2013 Annual Notice					\$18,632.60
01-16-2013	-	-	5.00	47.10	18,580.50
02-08-2013	175.00	-	8.75	-	18,746.75
02-16-2013	-	83.44	5.00	47.08	18,778.11
03-08-2013	175.00	-	8.75	-	18,944.36
03-16-2013	-	84.10	5.00	47.06	18,976.40
04-08-2013	175.00	-	8.75	-	19,142.65
04-16-2013	-	84.74	5.00	47.04	19,175.35
05-16-2013	-	85.27	5.00	47.04	19,208.58
06-16-2013	-	85.38	5.00	47.04	19,241.92
06-21-2013	175.00	-	8.75	-	19,408.17
06-21-2013	175.00	-	8.75	-	19,574.42
07-08-2013	175.00	-	8.75	-	19,740.67
07-16-2013	-	86.48	5.00	46.98	19,775.17
08-08-2013	175.00	-	8.75	-	19,941.42
08-16-2013	-	87.36	5.00	46.97	19,976.81
09-09-2013	175.00	-	8.75	-	20,143.06
09-16-2013	-	88.00	5.00	46.94	20,179.12
10-09-2013	175.00	-	8.75	-	20,345.37
10-16-2013	-	88.66	5.00	46.92	20,382.11
11-11-2013	175.00	-	8.75	-	20,548.36
11-16-2013	-	89.29	5.00	46.90	20,585.75
12-10-2013	175.00	-	8.75	-	20,752.00
12-16-2013	-	89.98	5.00	46.88	20,790.10
01-09-2014	175.00	-	8.75	-	20,956.35
Totals	\$2,100.00	\$952.70	\$165.00	\$563.95	\$20,956.35*

* Does not reflect interest to be earned January 16, 2014.

Information and Service

- If you have moved, please contact your State Farm Agent or visit statefarm.com[®] to change your address.
- All amounts shown are subject to verification.
- When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.
- Under the tax law, certain events during the life of a life insurance policy may be taxable to the policyowner. The following may result in taxable income: partial withdrawals, policy surrenders, lapses, assignments, as well as loans from policies that are MECs (Modified Endowment Contracts). If an event is taxable, generally the amount the policyowner is taxed on is the "gain" in the policy. The gain usually is the policy's account value less the premiums paid. Once a taxable gain is reported, it cannot be changed. Please contact your tax advisor for additional information.

Continued on next page



Information and Service (Continued)

- The following disclosure is required under New Hampshire law:

Any of the following actions related to your life insurance policy may have significant future financial, tax or other implications:

- Surrender of the policy;
- Lapse of the policy;
- Failure to pay premium;
- Application of the equity of the policy toward payment of premium;
- Application of accumulated dividends toward payment of premium;
- Financing premium payments;
- Sale of the policy; and
- Assignment of the policy and any right under the policy.

Before you act, you need to consider all options carefully and seek advice from a licensed financial advisor, attorney or other professional who can explain all available options and consequences.

- **IMPORTANT POLICY OWNER NOTICE** - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by calling your agent at 425-747-3600, by calling State Farm Insurance at 614-775-7909, or by writing to the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

State Farm Life Insurance Company (Not Licensed in MA, NY, or WI)
 State Farm Life and Accident Assurance Company (Licensed in NY and WI)
 Bloomington, IL



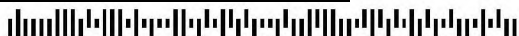
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State Farm Life Insurance Company
PO Box 2364
BLOOMINGTON, IL 61702-2364
Phone: 855-534-0227

L000041
WILLIAM T WHITMAN



Annual Notice

Policy Number: LF-1853-4088
Plan: Universal Life
Insured: WILLIAM T WHITMAN
Payment Amount: \$1,219.35

Agent Tim Crabtree
1 Lake Bellevue Dr Ste 102
Bellevue, WA 98005-2417
Phone: 425-747-3600

Important Next Steps

- Review this document closely to make sure this policy continues to meet your needs.
- Detach the bottom portion of this page and return it with your payment, or be a *Green Neighbor™* and pay your bill on-line.
- Universal Life policies are flexible and change from year to year based on interest rates, payments, and other factors. Contact your State Farm agent to review your policy and options available to you.

Thanks for letting us serve you!

Policy # LF-1853-4088

Page 1 of 6

Prepared January 15, 2015

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Key code: 1214516136



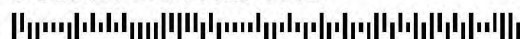
Walk In
See your
State Farm Agent



Insured: WILLIAM T WHITMAN
Policy Number: LF-1853-4088

Payment Amount: \$1,219.35
Make payment to State Farm

1609000004
Insurance Support Center
PO Box 588002
DULUTH GA 30029-8002



Office Use Only

Annual Notice

Life

1,219.35

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Policy Information

Policy Number
LF-1853-4088

Insured
WILLIAM T WHITMAN

Policy Date
January 16, 2001

Plan
Universal Life

Payment Information

\$1,219.35. This is the amount of loan interest due. Monthly payments of \$175.00 are made via the State Farm Payment Plan.

Any payment received after January 15, 2015, is not reflected on this notice.

This notice reflects activity from January 16, 2014, to January 16, 2015.

Beneficiary Information

The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: STEPHANIE ALICE WHITMAN

Successor: THOMAS HENRY WHITMAN (FATHER), RANDALL DEAN MAY

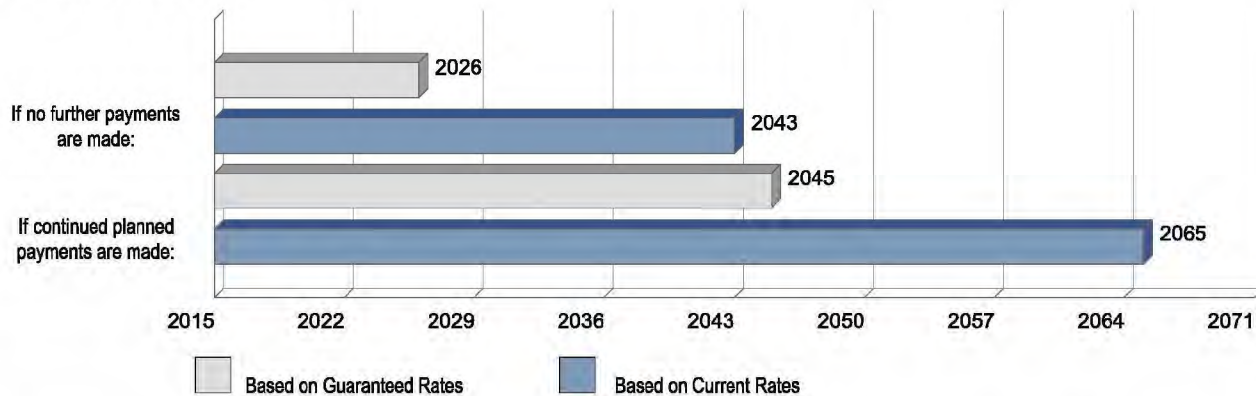
Note: A change in marital status could necessitate a new beneficiary designation. Please contact your agent if your marital status has changed.

Insurance Information

Insurance Amount	Insured
Universal Life	\$497,000.00
Cost of Insurance	
Universal Life	\$566.12



Coverage Projection



If no further payments are made, your policy will provide coverage until January 15, 2026, when the insured's age is 44, based on guaranteed rates, and until February 14, 2043, when the insured's age is 62, based on current rates.

If continued planned payments of \$175.00 each month are made, your policy will provide coverage until June 15, 2045, when the insured's age is 64, based on guaranteed rates, and until December 15, 2065, when the insured's age is 84, based on current rates.

The age(s) shown above are based on the insured's age as of the policy anniversary preceding the projected coverage end date.

This information assumes loan interest is paid when due.

Account Value

Balance from 2014 Annual Notice	\$21,047.01
Increases	
Payments	2,100.00
Interest Credited	1,061.96
Interest to be Earned January 16, 2015	100.71
Decreases	
Expense Charges	- 165.00
Cost of Insurance	- 566.12
Total Account Value as of January 16, 2015	\$23,578.56
Loan Balance*	\$15,241.89

*Loan Balance does not include the \$1,219.35 loan interest due. The current interest rate on this loan is 8%.

Interest Rate — The account value currently earns 4% except the account value equal to any policy loan earns 6%. The interest rates are effective annual interest rates.

Surrender Value as of January 16, 2015, will be \$7,117.32. The total account value has been reduced by the surrender charge of \$0.00, policy loan of \$15,241.89, and loan interest of \$1,219.35 to determine the surrender value.

Note: If you request to surrender your policy, it cannot be reinstated.

Transaction details are provided in the Account Value Transactions portion of this notice.

Account Value Transactions

Date	Payments/ (Withdrawals)	Interest Credited	Expense Charges	Cost of Insurance	Ending Account Value
Balance from 2014 Annual Notice					\$21,047.01
01-16-2014	-	-	5.00	47.29	20,994.72
02-11-2014	175.00	-	8.75	-	21,160.97
02-16-2014	-	93.09	5.00	47.27	21,201.79
03-11-2014	175.00	-	8.75	-	21,368.04
03-16-2014	-	93.78	5.00	47.25	21,409.57
04-09-2014	175.00	-	8.75	-	21,575.82
04-16-2014	-	94.49	5.00	47.23	21,618.08
05-09-2014	175.00	-	8.75	-	21,784.33
05-16-2014	-	95.17	5.00	47.21	21,827.29
06-10-2014	175.00	-	8.75	-	21,993.54
06-16-2014	-	95.84	5.00	47.19	22,037.19
07-09-2014	175.00	-	8.75	-	22,203.44
07-16-2014	-	96.55	5.00	47.17	22,247.82
08-11-2014	175.00	-	8.75	-	22,414.07
08-16-2014	-	97.20	5.00	47.15	22,459.12
09-09-2014	175.00	-	8.75	-	22,625.37
09-16-2014	-	97.92	5.00	47.12	22,671.17
10-09-2014	175.00	-	8.75	-	22,837.42
10-16-2014	-	98.62	5.00	47.10	22,883.94
11-11-2014	175.00	-	8.75	-	23,050.19
11-16-2014	-	99.28	5.00	47.08	23,097.39
12-09-2014	175.00	-	8.75	-	23,263.64
12-16-2014	-	100.02	5.00	47.06	23,311.60
01-09-2015	175.00	-	8.75	-	23,477.85
Totals	\$2,100.00	\$1,061.96	\$165.00	\$566.12	\$23,477.85*

* Does not reflect interest to be earned January 16, 2015.

Information and Service

- If you have moved, please contact your State Farm Agent or visit statefarm.com® to change your address.
- All amounts shown are subject to verification.
- When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.
- Under the tax law, certain events during the life of a life insurance policy may be taxable to the policyowner. The following may result in taxable income: partial withdrawals, policy surrenders, lapses, assignments, as well as loans from policies that are MECs (Modified Endowment Contracts). If an event is taxable, generally the amount the policyowner is taxed on is the "gain" in the policy. The gain usually is the policy's account value less the premiums paid. Once a taxable gain is reported, it cannot be changed. Please contact your tax advisor for additional information.

Continued on next page



Information and Service (Continued)

- The following disclosure is required under New Hampshire law:

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- Surrender of the policy;
- Lapse of the policy;
- Failure to pay premium;
- Application of the equity of the policy toward payment of premium;
- Application of accumulated dividends toward payment of premium;
- Financing premium payments;
- Sale of the policy; and
- Assignment of the policy and any right under the policy.

Before you act, you need to consider all options carefully and seek advice from a licensed financial advisor, attorney or other professional who can explain all available options and consequences.

- **IMPORTANT POLICY OWNER NOTICE** - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by calling your agent at 425-747-3600, by calling State Farm Insurance at 855-534-0227, or by writing to the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

State Farm Life Insurance Company (Not Licensed in MA, NY, or WI)
 State Farm Life and Accident Assurance Company (Licensed in NY and WI)
 Bloomington, IL



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0303-C10008

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State Farm Life Insurance Company
PO Box 2364
BLOOMINGTON, IL 61702-2364
Phone: 855-534-0227

L000044
WILLIAM T WHITMAN



Annual Notice

Policy Number: LF-1853-4088
Plan: Universal Life
Insured: WILLIAM T WHITMAN
Payment Amount: \$1,316.90

Agent Tim Crabtree
1 Lake Bellevue Dr Ste 102
Bellevue, WA 98005-2417
Phone: 425-747-3600

Important Next Steps

- Review this document closely to make sure this policy continues to meet your needs.
- Detach the bottom portion of this page and return it with your payment, or be a *Green Neighbor™* and pay your bill on-line.
- Universal Life policies are flexible and change from year to year based on interest rates, payments, and other factors. Contact your State Farm agent to review your policy and options available to you.

Thanks for letting us serve you!

Policy # LF-1853-4088

Page 1 of 6

Prepared January 15, 2016

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Insured: WILLIAM T WHITMAN
Policy Number: LF-1853-4088

Payment Amount: \$1,316.90
Make payment to State Farm

1609000004
Insurance Support Center
PO Box 588002
DULUTH GA 30029-8002



Office Use Only

Annual Notice

Life

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Policy Information

Policy Number
LF-1853-4088

Insured
WILLIAM T WHITMAN

Policy Date
January 16, 2001

Plan
Universal Life

Payment Information

\$1,316.90. This is the amount of loan interest due. Monthly payments of \$175.00 are made via the State Farm Payment Plan.

Any payment received after January 15, 2016, is not reflected on this notice.

This notice reflects activity from January 16, 2015, to January 16, 2016.

Beneficiary Information

The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: STEPHANIE ALICE WHITMAN

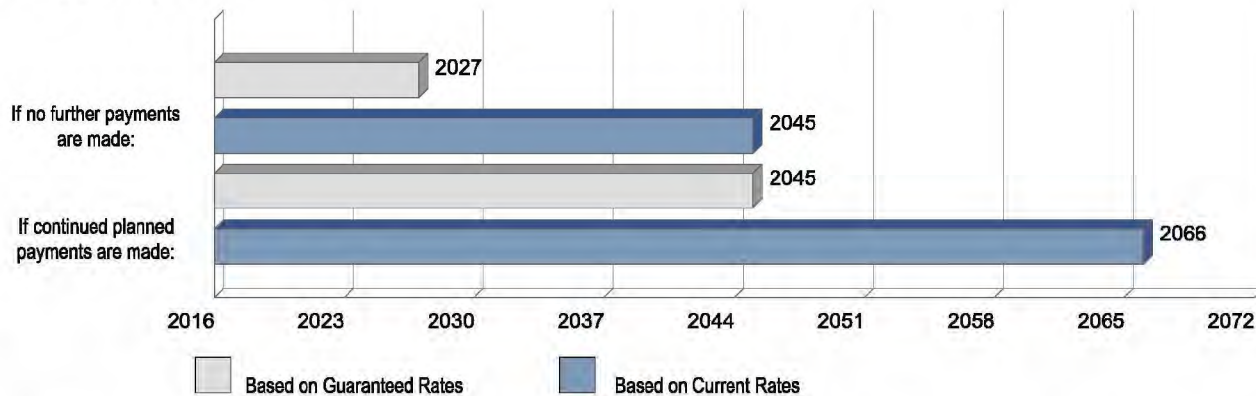
Successor: THOMAS HENRY WHITMAN (FATHER), RANDALL DEAN MAY

Note: Probate laws may disqualify a policy owner's former spouse from receiving life insurance proceeds. You should update your beneficiary designation if your marital status changes and you want your former spouse to receive the proceeds of this policy.

Insurance Information

Insurance Amount	Insured
Universal Life	\$497,000.00
Cost of Insurance	
Universal Life	\$567.53

Coverage Projection



If no further payments are made, your policy will provide coverage until December 15, 2027, when the insured's age is 46, based on guaranteed rates, and until January 15, 2045, when the insured's age is 63, based on current rates.

If continued planned payments of \$175.00 each month are made, your policy will provide coverage until August 15, 2045, when the insured's age is 64, based on guaranteed rates, and until March 17, 2066, when the insured's age is 85, based on current rates.

The age(s) shown above are based on the insured's age as of the policy anniversary preceding the projected coverage end date.

This information assumes loan interest is paid when due.

Account Value

Balance from 2015 Annual Notice	\$23,578.56
Increases	
Payments	2,100.00
Interest Credited	1,176.36
Interest to be Earned January 16, 2016	111.28
Decreases	
Expense Charges	- 165.00
Cost of Insurance	- 567.53
Total Account Value as of January 16, 2016	\$26,233.67
Loan Balance*	\$16,461.24

*Loan Balance does not include the \$1,316.90 loan interest due. The current interest rate on this loan is 8%.

Interest Rate — The account value currently earns 4% except the account value equal to any policy loan earns 6%. The interest rates are effective annual interest rates.

Surrender Value as of January 16, 2016, will be \$8,455.53. The total account value has been reduced by the surrender charge of \$0.00, policy loan of \$16,461.24, and loan interest of \$1,316.90 to determine the surrender value.

Note: If you request to surrender your policy, it cannot be reinstated.

Transaction details are provided in the Account Value Transactions portion of this notice.

Account Value Transactions

Date	Payments/ (Withdrawals)	Interest Credited	Expense Charges	Cost of Insurance	Ending Account Value
Balance from 2015 Annual Notice					\$23,578.56
01-16-2015	-	-	5.00	47.42	23,526.14
02-10-2015	175.00	-	8.75	-	23,692.39
02-16-2015	-	103.34	5.00	47.39	23,743.34
03-10-2015	175.00	-	8.75	-	23,909.59
03-16-2015	-	104.06	5.00	47.37	23,961.28
04-09-2015	175.00	-	8.75	-	24,127.53
04-16-2015	-	104.78	5.00	47.35	24,179.96
05-11-2015	175.00	-	8.75	-	24,346.21
05-16-2015	-	105.47	5.00	47.33	24,399.35
06-09-2015	175.00	-	8.75	-	24,565.60
06-16-2015	-	106.22	5.00	47.31	24,619.51
07-09-2015	175.00	-	8.75	-	24,785.76
07-16-2015	-	106.94	5.00	47.28	24,840.42
08-11-2015	175.00	-	8.75	-	25,006.67
08-16-2015	-	107.63	5.00	47.26	25,062.04
09-09-2015	175.00	-	8.75	-	25,228.29
09-16-2015	-	108.39	5.00	47.24	25,284.44
10-09-2015	175.00	-	8.75	-	25,450.69
10-16-2015	-	109.12	5.00	47.22	25,507.59
11-10-2015	175.00	-	8.75	-	25,673.84
11-16-2015	-	109.83	5.00	47.19	25,731.48
12-09-2015	175.00	-	8.75	-	25,897.73
12-16-2015	-	110.58	5.00	47.17	25,956.14
01-11-2016	175.00	-	8.75	-	26,122.39
Totals	\$2,100.00	\$1,176.36	\$165.00	\$567.53	\$26,122.39*

* Does not reflect interest to be earned January 16, 2016.

Information and Service

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- When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.
- Under the tax law, certain events during the life of a life insurance policy may be taxable to the policyowner. The following may result in taxable income: partial withdrawals, policy surrenders, lapses, assignments, as well as loans from policies that are MECs (Modified Endowment Contracts). If an event is taxable, generally the amount the policyowner is taxed on is the "gain" in the policy. The gain usually is the policy's account value less the premiums paid. Once a taxable gain is reported, it cannot be changed. Please contact your tax advisor for additional information.

Continued on next page



Information and Service (Continued)

- The following disclosure is required under New Hampshire law:

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- Surrender of the policy;
- Lapse of the policy;
- Failure to pay premium;
- Application of the equity of the policy toward payment of premium;
- Application of accumulated dividends toward payment of premium;
- Financing premium payments;
- Sale of the policy; and
- Assignment of the policy and any right under the policy.

Before you act, you need to consider all options carefully and seek advice from a licensed financial advisor, attorney or other professional who can explain all available options and consequences.

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State Farm Life Insurance Company (Not Licensed in MA, NY, or WI)
State Farm Life and Accident Assurance Company (Licensed in NY and WI)
Bloomington, IL



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0303-G10008

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State Farm Life Insurance Company
PO Box 2364
BLOOMINGTON, IL 61702-2364
Phone: 855-534-0227



L001019
WILLIAM T WHITMAN



ST-1
0103-1000

Annual Notice

Policy Number: LF-1853-4088
Plan: Universal Life
Insured: WILLIAM T WHITMAN
Payment Amount: \$1,422.25

Agent Tim Crabtree
1 Lake Bellevue Dr Ste 102
Bellevue, WA 98005-2417
Phone: 425-747-3600

Important Next Steps

- Review this document closely to make sure this policy continues to meet your needs.
- Detach the bottom portion of this page and return it with your payment, or be a *Green Neighbor™* and pay your bill on-line.
- Universal Life policies are flexible and change from year to year based on interest rates, payments, and other factors. Contact your State Farm agent to review your policy and options available to you.

Thanks for letting us serve you!

Policy # LF-1853-4088

Page 1 of 6

Prepared January 14, 2017

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Automated Line: 1-800-440-0998
Key code: 1215385267



Walk In
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State Farm Agent



Insured: WILLIAM T WHITMAN
Policy Number: LF-1853-4088

Payment Amount: \$1,422.25
Make payment to State Farm

1609000004

Insurance Support Center
PO Box 588002
DULUTH GA 30029-8002



Office Use Only

Annual Notice

Life

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Policy Information

Policy Number
LF-1853-4088

Insured
WILLIAM T WHITMAN

Policy Date
January 16, 2001

Plan
Universal Life

Payment Information

\$1,422.25. This is the amount of loan interest due. Monthly payments of \$175.00 are made via the State Farm Payment Plan.

Any payment received after January 14, 2017, is not reflected on this notice.

This notice reflects activity from January 16, 2016, to January 16, 2017.

Beneficiary Information

The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: STEPHANIE ALICE WHITMAN
Successor: THOMAS HENRY WHITMAN (FATHER), RANDALL DEAN MAY

Note: Probate laws may disqualify a policy owner's former spouse from receiving life insurance proceeds. You should update your beneficiary designation if your marital status changes and you want your former spouse to receive the proceeds of this policy.

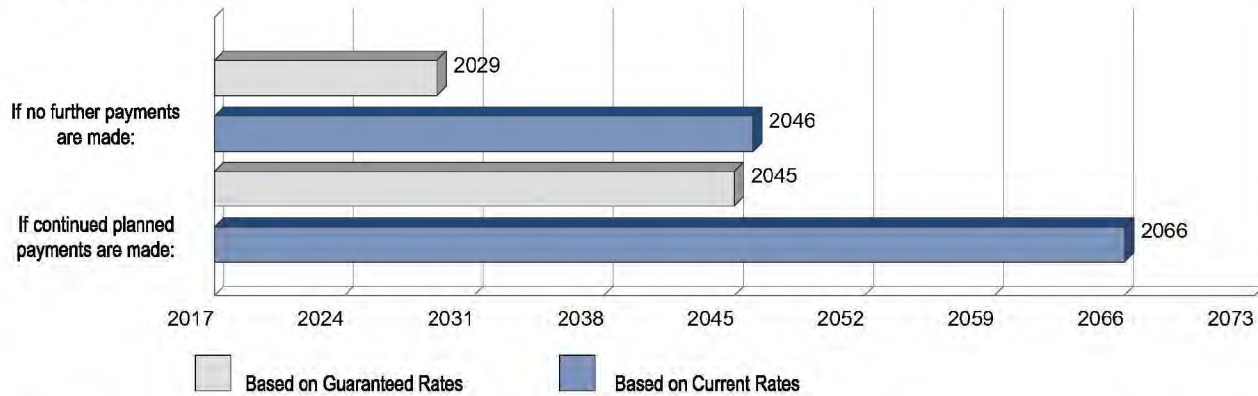
Insurance Information

Insurance Amount	Insured
Universal Life	\$497,000.00
Cost of Insurance	
Universal Life	\$565.42

Coverage Projection



ST-1-
0203-1000



If no further payments are made, your policy will provide coverage until September 14, 2029, when the insured's age is 48, based on guaranteed rates, and until September 14, 2046, when the insured's age is 65, based on current rates.

If continued planned payments of \$175.00 each month are made, your policy will provide coverage until October 15, 2045, when the insured's age is 64, based on guaranteed rates, and until May 15, 2066, when the insured's age is 85, based on current rates.

The age(s) shown above are based on the insured's age as of the policy anniversary preceding the projected coverage end date.

This information assumes loan interest is paid when due.

Account Value

Balance from 2016 Annual Notice	\$26,233.67
Increases	
Payments	2,100.00
Interest Credited	1,296.64
Interest to be Earned January 16, 2017	122.49
Decreases	
Expense Charges	- 165.00
Cost of Insurance	- 565.42
Total Account Value as of January 16, 2017	\$29,022.38
Loan Balance*	\$17,778.14

*Loan Balance does not include the \$1,422.25 loan interest due. The current interest rate on this loan is 8%.

Interest Rate — The account value currently earns 4% except the account value equal to any policy loan earns 6%. The interest rates are effective annual interest rates.

Surrender Value as of January 16, 2017, will be \$9,821.99. The total account value has been reduced by the surrender charge of \$0.00, policy loan of \$17,778.14, and loan interest of \$1,422.25 to determine the surrender value.

Note: If you request to surrender your policy, it cannot be reinstated.

Transaction details are provided in the Account Value Transactions portion of this notice.

Account Value Transactions

Date	Payments/ (Withdrawals)	Interest Credited	Expense Charges	Cost of Insurance	Ending Account Value
Balance from 2016 Annual Notice					\$26,233.67
01-16-2016	-	-	5.00	47.24	26,181.43
02-09-2016	175.00	-	8.75	-	26,347.68
02-16-2016	-	114.15	5.00	47.22	26,409.61
03-09-2016	175.00	-	8.75	-	26,575.86
03-16-2016	-	114.91	5.00	47.20	26,638.57
04-16-2016	-	115.54	5.00	47.19	26,701.92
04-20-2016	175.00	-	8.75	-	26,868.17
05-16-2016	-	116.20	5.00	47.17	26,932.20
05-19-2016	175.00	-	8.75	-	27,098.45
06-14-2016	175.00	-	8.75	-	27,264.70
06-16-2016	-	117.00	5.00	47.13	27,329.57
07-11-2016	175.00	-	8.75	-	27,495.82
07-16-2016	-	117.88	5.00	47.10	27,561.60
08-09-2016	175.00	-	8.75	-	27,727.85
08-16-2016	-	118.67	5.00	47.08	27,794.44
09-09-2016	175.00	-	8.75	-	27,960.69
09-16-2016	-	119.43	5.00	47.06	28,028.06
10-11-2016	175.00	-	8.75	-	28,194.31
10-16-2016	-	120.16	5.00	47.03	28,262.44
11-09-2016	175.00	-	8.75	-	28,428.69
11-16-2016	-	120.96	5.00	47.01	28,497.64
12-09-2016	175.00	-	8.75	-	28,663.89
12-16-2016	-	121.74	5.00	46.99	28,733.64
01-10-2017	175.00	-	8.75	-	28,899.89
Totals	\$2,100.00	\$1,296.64	\$165.00	\$565.42	\$28,899.89*

* Does not reflect interest to be earned January 16, 2017.

Information and Service

- If you have moved, please contact your State Farm Agent or visit statefarm.com® to change your address.
- All amounts shown are subject to verification.
- When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.
- Under the tax law, certain events during the life of a life insurance policy may be taxable to the policyowner. The following may result in taxable income: partial withdrawals, policy surrenders, lapses, assignments, as well as loans from policies that are MECs (Modified Endowment Contracts). If an event is taxable, generally the amount the policyowner is taxed on is the "gain" in the policy. The gain usually is the policy's account value less the premiums paid. Once a taxable gain is reported, it cannot be changed. Please contact your tax advisor for additional information.

Continued on next page

Information and Service (Continued)

- The following disclosure is required under New Hampshire law:



ST-1-
0303-1000

Any of the following actions related to your life insurance policy may have significant future financial, tax or other implications:

- Surrender of the policy;
- Lapse of the policy;
- Failure to pay premium;
- Application of the equity of the policy toward payment of premium;
- Application of accumulated dividends toward payment of premium;
- Financing premium payments;
- Sale of the policy; and
- Assignment of the policy and any right under the policy.

Before you act, you need to consider all options carefully and seek advice from a licensed financial advisor, attorney or other professional who can explain all available options and consequences.

- **IMPORTANT POLICY OWNER NOTICE** - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by calling your agent at 425-747-3600, by calling State Farm Insurance at 855-534-0227, or by writing to the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

State Farm Life Insurance Company (Not Licensed in MA, NY, or WI)
State Farm Life and Accident Assurance Company (Licensed in NY and WI)
Bloomington, IL



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State Farm Life Insurance Company
PO Box 2364
BLOOMINGTON, IL 61702-2364
Phone: 855-534-0227



L000047
WILLIAM T WHITMAN



ST-1
0103-1000

Annual Notice

Policy Number: LF-1853-4088
Plan: Universal Life
Insured: WILLIAM T WHITMAN
Payment Amount: \$1,536.03

Agent Tim Crabtree
1 Lake Bellevue Dr Ste 102
Bellevue, WA 98005-2417
Phone: 425-747-3600

Important Next Steps

- Review this document closely to make sure this policy continues to meet your needs.
- Detach the bottom portion of this page and return it with your payment, or be a *Green Neighbor™* and pay your bill on-line.
- Universal Life policies are flexible and change from year to year based on interest rates, payments, and other factors. Contact your State Farm agent to review your policy and options available to you.

Thanks for letting us serve you!

Policy # LF-1853-4088

Page 1 of 6

Prepared January 15, 2018

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Key Code: 1210751014



Walk In
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State Farm Agent



Insured: WILLIAM T WHITMAN
Policy Number: LF-1853-4088

Payment Amount: \$1,536.03
Make payment to State Farm

1609000004

Insurance Support Center
PO Box 588002
DULUTH GA 30029-8002



Office Use Only

Annual Notice

Life

1,536.03

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Policy Information

Policy Number
LF-1853-4088

Insured
WILLIAM T WHITMAN

Policy Date
January 16, 2001

Plan
Universal Life

Payment Information

\$1,536.03. This is the amount of loan interest due. Monthly payments of \$175.00 are made via the State Farm Payment Plan.

Any payment received after January 15, 2018, is not reflected on this notice.

This notice reflects activity from January 16, 2017, to January 16, 2018.

Beneficiary Information

The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: STEPHANIE ALICE WHITMAN

Successor: THOMAS HENRY WHITMAN (FATHER), RANDALL DEAN MAY

Note: Probate laws may disqualify a policy owner's former spouse from receiving life insurance proceeds. You should update your beneficiary designation if your marital status changes and you want your former spouse to receive the proceeds of this policy.

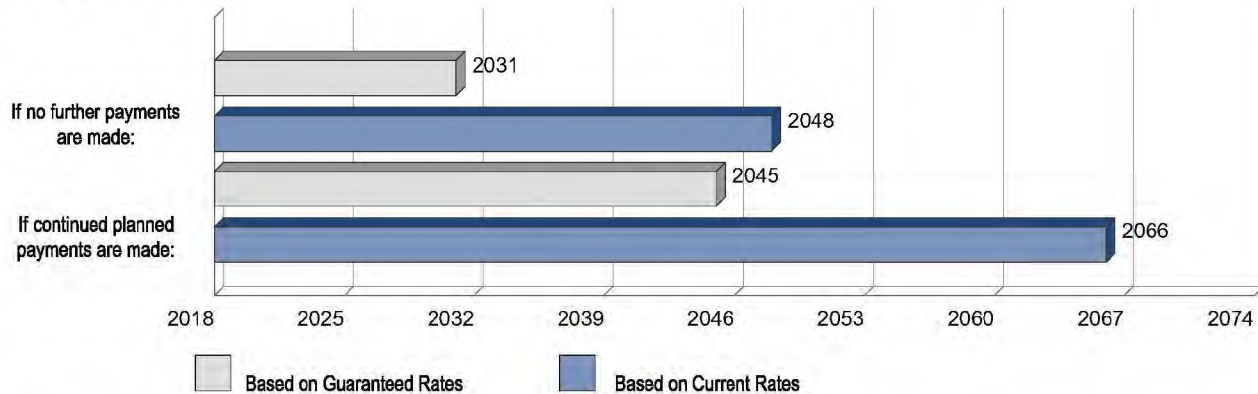
Insurance Information

Insurance Amount	Insured
Universal Life	\$497,000.00
Cost of Insurance	
Universal Life	\$585.95

Coverage Projection



ST-1-
0203-1000



If no further payments are made, your policy will provide coverage until January 15, 2031, when the insured's age is 49, based on guaranteed rates, and until February 14, 2048, when the insured's age is 67, based on current rates.

If continued planned payments of \$175.00 each month are made, your policy will provide coverage until December 15, 2045, when the insured's age is 64, based on guaranteed rates, and until July 15, 2066, when the insured's age is 85, based on current rates.

The age(s) shown above are based on the insured's age as of the policy anniversary preceding the projected coverage end date.

This information assumes loan interest is paid when due.

Account Value

Balance from 2017 Annual Notice	\$29,022.38
Increases	
Payments	2,100.00
Interest Credited	1,424.09
Interest to be Earned January 16, 2018	134.25
Decreases	
Expense Charges	- 165.00
Cost of Insurance	- 585.95
Total Account Value as of January 16, 2018	\$31,929.77
Loan Balance*	\$19,200.39

*Loan Balance does not include the \$1,536.03 loan interest due. The current interest rate on this loan is 8%.

Interest Rate — The account value currently earns 4% except the account value equal to any policy loan earns 6%. The interest rates are effective annual interest rates.

Surrender Value as of January 16, 2018, will be \$11,193.35. The total account value has been reduced by the surrender charge of \$0.00, policy loan of \$19,200.39, and loan interest of \$1,536.03 to determine the surrender value.

Note: If you request to surrender your policy, it cannot be reinstated.

Transaction details are provided in the Account Value Transactions portion of this notice.

Account Value Transactions

Date	Payments/ (Withdrawals)	Interest Credited	Expense Charges	Cost of Insurance	Ending Account Value
Balance from 2017 Annual Notice					\$29,022.38
01-16-2017	-	-	5.00	48.97	28,968.41
02-09-2017	175.00	-	8.75	-	29,134.66
02-16-2017	-	125.54	5.00	48.94	29,206.26
03-09-2017	175.00	-	8.75	-	29,372.51
03-16-2017	-	126.33	5.00	48.92	29,444.92
04-11-2017	175.00	-	8.75	-	29,611.17
04-16-2017	-	127.07	5.00	48.89	29,684.35
05-09-2017	175.00	-	8.75	-	29,850.60
05-16-2017	-	127.89	5.00	48.87	29,924.62
06-09-2017	175.00	-	8.75	-	30,090.87
06-16-2017	-	128.67	5.00	48.84	30,165.70
07-11-2017	175.00	-	8.75	-	30,331.95
07-16-2017	-	129.43	5.00	48.82	30,407.56
08-09-2017	175.00	-	8.75	-	30,573.81
08-16-2017	-	130.25	5.00	48.79	30,650.27
09-11-2017	175.00	-	8.75	-	30,816.52
09-16-2017	-	131.01	5.00	48.77	30,893.76
10-10-2017	175.00	-	8.75	-	31,060.01
10-16-2017	-	131.83	5.00	48.74	31,138.10
11-09-2017	175.00	-	8.75	-	31,304.35
11-16-2017	-	132.65	5.00	48.71	31,383.29
12-11-2017	175.00	-	8.75	-	31,549.54
12-16-2017	-	133.42	5.00	48.69	31,629.27
01-09-2018	175.00	-	8.75	-	31,795.52
Totals	\$2,100.00	\$1,424.09	\$165.00	\$585.95	\$31,795.52*

* Does not reflect interest to be earned January 16, 2018.

Information and Service

- If you have moved, please contact your State Farm Agent or visit statefarm.com® to change your address.
- All amounts shown are subject to verification.
- When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.
- Under the tax law, certain events during the life of a life insurance policy may be taxable to the policyowner. The following may result in taxable income: partial withdrawals, policy surrenders, lapses, assignments, as well as loans from policies that are MECs (Modified Endowment Contracts). If an event is taxable, generally the amount the policyowner is taxed on is the "gain" in the policy. The gain usually is the policy's account value less the premiums paid. Once a taxable gain is reported, it cannot be changed. Please contact your tax advisor for additional information.

Continued on next page

Information and Service (Continued)

- The following disclosure is required under New Hampshire law:



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- Surrender of the policy;
- Lapse of the policy;
- Failure to pay premium;
- Application of the equity of the policy toward payment of premium;
- Application of accumulated dividends toward payment of premium;
- Financing premium payments;
- Sale of the policy; and
- Assignment of the policy and any right under the policy.

Before you act, you need to consider all options carefully and seek advice from a licensed financial advisor, attorney or other professional who can explain all available options and consequences.

- IMPORTANT POLICY OWNER NOTICE** - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by calling your agent at 425-747-3600, by calling State Farm Insurance at 855-534-0227, or by writing to the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

State Farm Life Insurance Company (Not Licensed in MA, NY, or WI)
 State Farm Life and Accident Assurance Company (Licensed in NY and WI)
 Bloomington, IL



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State Farm Life Insurance Company
PO Box 2364
BLOOMINGTON, IL 61702-2364
Phone: 855-534-0227



L000041
WILLIAM T WHITMAN



ST-1-
0103-1000

Annual Notice

Policy Number: LF-1853-4088
Plan: Universal Life
Insured: WILLIAM T WHITMAN
Payment Amount: \$1,658.91

Agent Tim Crabtree
1 Lake Bellevue Dr Ste 102
Bellevue, WA 98005-2417
Phone: 425-747-3600

Important Next Steps

- Review this document closely to make sure this policy continues to meet your needs.
- Detach the bottom portion of this page and return it with your payment, or be a *Green Neighbor™* and pay your bill on-line.
- Universal Life policies are flexible and change from year to year based on interest rates, payments, and other factors. Contact your State Farm agent to review your policy and options available to you.

Thanks for letting us serve you!

Policy # LF-1853-4088

Page 1 of 6

Prepared January 15, 2019

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Insured: WILLIAM T WHITMAN
Policy Number: LF-1853-4088

Payment Amount: \$1,658.91
Make payment to State Farm

1609000004
Insurance Support Center
PO Box 588002
DULUTH GA 30029-8002



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Annual Notice

Life

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Confidential

PLTF-WHITMAN-00000037

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Policy Information

Policy Number
LF-1853-4088

Insured
WILLIAM T WHITMAN

Policy Date
January 16, 2001

Plan
Universal Life

Payment Information

\$1,658.91. This is the amount of loan interest due. Monthly payments of \$175.00 are made via the State Farm Payment Plan.

Any payment received after January 15, 2019, is not reflected on this notice.

This notice reflects activity from January 16, 2018, to January 16, 2019.

Beneficiary Information

The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: STEPHANIE ALICE WHITMAN

Successor: THOMAS HENRY WHITMAN (FATHER), RANDALL DEAN MAY

Note: Probate laws may disqualify a policy owner's former spouse from receiving life insurance proceeds. You should update your beneficiary designation if your marital status changes and you want your former spouse to receive the proceeds of this policy.

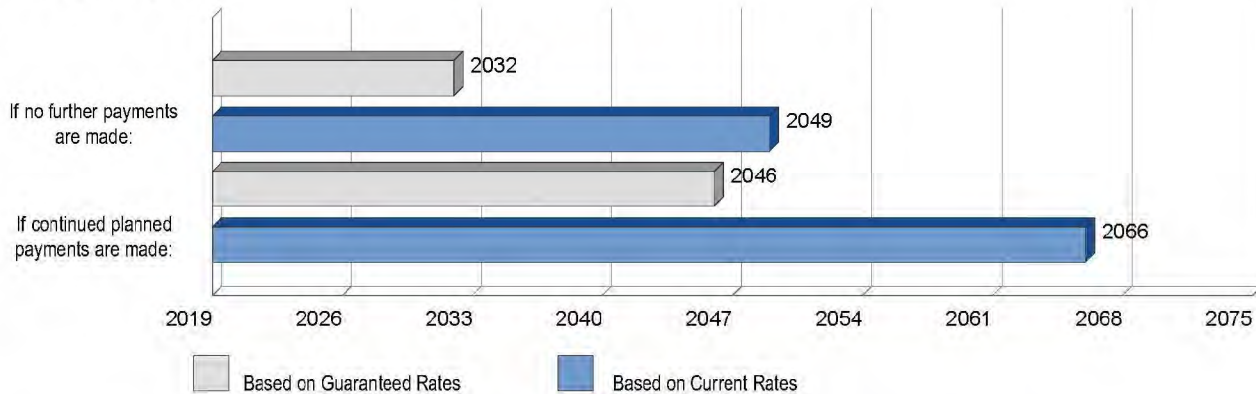
Insurance Information

Insurance Amount	Insured
Universal Life	\$497,000.00
Cost of Insurance	
Universal Life	\$609.39

Coverage Projection



ST-1-
0203-1000



If no further payments are made, your policy will provide coverage until August 15, 2032, when the insured's age is 51, based on guaranteed rates, and until July 15, 2049, when the insured's age is 68, based on current rates.

If continued planned payments of \$175.00 each month are made, your policy will provide coverage until February 14, 2046, when the insured's age is 65, based on guaranteed rates, and until October 15, 2066, when the insured's age is 85, based on current rates.

The age(s) shown above are based on the insured's age as of the policy anniversary preceding the projected coverage end date.

This information assumes loan interest is paid when due.

Account Value

Balance from 2018 Annual Notice	\$31,929.77
Increases	
Payments	2,100.00
Interest Credited	1,557.48
Interest to be Earned January 16, 2019	146.58
Decreases	
Expense Charges	- 165.00
Cost of Insurance	- 609.39
Total Account Value as of January 16, 2019	\$34,959.44
Loan Balance*	\$20,736.42

*Loan Balance does not include the \$1,658.91 loan interest due. The current interest rate on this loan is 8%.

Interest Rate — The account value currently earns 4% except the account value equal to any policy loan earns 6%. The interest rates are effective annual interest rates.

Surrender Value as of January 16, 2019, will be \$12,564.11. The total account value has been reduced by the surrender charge of \$0.00, policy loan of \$20,736.42, and loan interest of \$1,658.91 to determine the surrender value.

Note: If you request to surrender your policy, it cannot be reinstated.

Transaction details are provided in the Account Value Transactions portion of this notice.



Account Value Transactions

Date	Payments/ (Withdrawals)	Interest Credited	Expense Charges	Cost of Insurance	Ending Account Value
Balance from 2018 Annual Notice					\$31,929.77
01-16-2018	-	-	5.00	50.93	31,873.84
02-09-2018	175.00	-	8.75	-	32,040.09
02-16-2018	-	137.50	5.00	50.91	32,121.68
03-09-2018	175.00	-	8.75	-	32,287.93
03-16-2018	-	138.33	5.00	50.88	32,370.38
04-10-2018	175.00	-	8.75	-	32,536.63
04-16-2018	-	139.11	5.00	50.85	32,619.89
05-09-2018	175.00	-	8.75	-	32,786.14
05-16-2018	-	139.95	5.00	50.82	32,870.27
06-11-2018	175.00	-	8.75	-	33,036.52
06-16-2018	-	140.73	5.00	50.80	33,121.45
07-10-2018	175.00	-	8.75	-	33,287.70
07-16-2018	-	141.57	5.00	50.77	33,373.50
08-09-2018	175.00	-	8.75	-	33,539.75
08-16-2018	-	142.41	5.00	50.74	33,626.42
09-11-2018	175.00	-	8.75	-	33,792.67
09-16-2018	-	143.20	5.00	50.71	33,880.16
10-09-2018	175.00	-	8.75	-	34,046.41
10-16-2018	-	144.07	5.00	50.69	34,134.79
11-09-2018	175.00	-	8.75	-	34,301.04
11-16-2018	-	144.90	5.00	50.66	34,390.28
12-11-2018	175.00	-	8.75	-	34,556.53
12-16-2018	-	145.71	5.00	50.63	34,646.61
01-09-2019	175.00	-	8.75	-	34,812.86
Totals	\$2,100.00	\$1,557.48	\$165.00	\$609.39	\$34,812.86*

* Does not reflect interest to be earned January 16, 2019.

Information and Service

- If you have moved, please contact your State Farm Agent or visit statefarm.com[®] to change your address.
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Continued on next page

Information and Service (Continued)

- The following disclosure is required under New Hampshire law:



ST-1-
0303-1000

Any of the following actions related to your life insurance policy may have significant future financial, tax or other implications:

- Surrender of the policy;
- Lapse of the policy;
- Failure to pay premium;
- Application of the equity of the policy toward payment of premium;
- Application of accumulated dividends toward payment of premium;
- Financing premium payments;
- Sale of the policy; and
- Assignment of the policy and any right under the policy.

Before you act, you need to consider all options carefully and seek advice from a licensed financial advisor, attorney or other professional who can explain all available options and consequences.

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State Farm Life Insurance Company (Not Licensed in MA, NY, or WI)
State Farm Life and Accident Assurance Company (Licensed in NY and WI)
Bloomington, IL



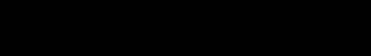
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State Farm Life Insurance Company
PO Box 2364
BLOOMINGTON, IL 61702-2364
Phone: 855-534-0227



L000039
WILLIAM T WHITMAN



ST-0103-0000

Annual Notice

Policy Number:	LF-1853-4088
Plan:	Universal Life
Insured:	WILLIAM T WHITMAN

Agent Tim Crabtree
1 Lake Bellevue Dr Ste 102
Bellevue, WA 98005-2417
Phone: 425-747-3600

Important Next Steps

- Review this document closely to make sure this policy continues to meet your needs.
- Universal Life policies are flexible and change from year to year based on interest rates, payments, and other factors. Contact your State Farm agent to review your policy and options available to you.

Thanks for letting us serve you!



You can count on us.

Life might be unpredictable, but we're not. We're here to help life go right. Talk to your State Farm® agent today.

TP28.1

Policy Information

Policy Number
LF-1853-4088

Policy Date
January 16, 2001

Payment Information
\$175.00 via the State Farm Payment Plan.

Insured
WILLIAM T WHITMAN

Plan
Universal Life

Any payment received after January 15, 2020, is not reflected on this notice.

This notice reflects activity from January 16, 2019, to January 16, 2020.

Beneficiary Information

The beneficiary designation is an important part of your policy. Your beneficiary designation is:

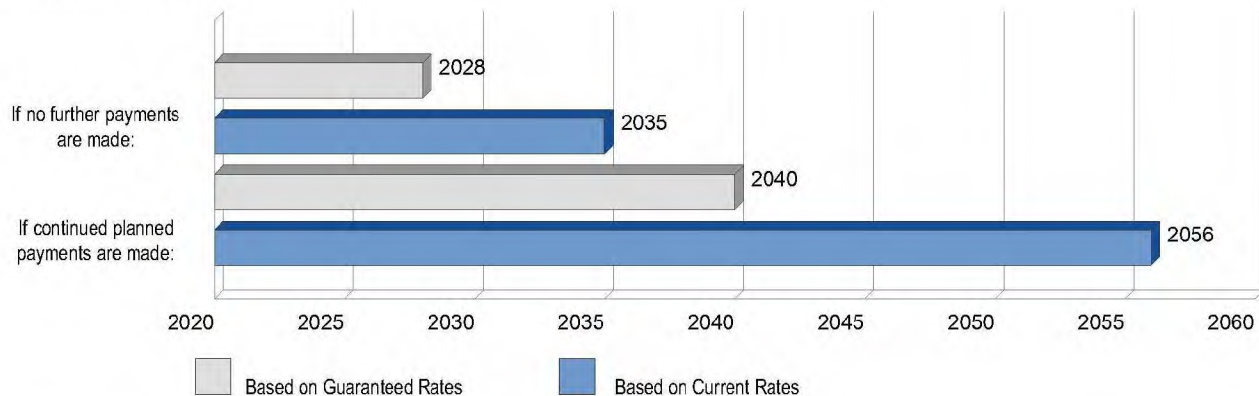
Primary: STEPHANIE ALICE WHITMAN
Successor: THOMAS HENRY WHITMAN (FATHER), RANDALL DEAN MAY

Note: Probate laws may disqualify a policy owner's former spouse from receiving life insurance proceeds. You should update your beneficiary designation if your marital status changes and you want your former spouse to receive the proceeds of this policy.

Insurance Information

Insurance Amount	Insured
Universal Life	\$474,197.00
Cost of Insurance	
Universal Life	\$642.25

Coverage Projection



If no further payments are made, your policy will provide coverage until December 15, 2028, when the insured's age is 47, based on guaranteed rates, and until December 15, 2035, when the insured's age is 54, based on current rates.

If continued planned payments of \$175.00 each month are made, your policy will provide coverage until June 15, 2040, when the insured's age is 59, based on guaranteed rates, and until February 14, 2056, when the insured's age is 75, based on current rates.

The age(s) shown above are based on the insured's age as of the policy anniversary preceding the projected coverage end date.

Account Value

ST
0203-0000

Balance from 2019 Annual Notice	\$34,959.44
Increases	
Payments	2,100.00
Interest Credited	787.25
Interest to be Earned January 16, 2020	46.17
Decreases	
Expense Charges	- 165.00
Cost of Insurance	- 642.25
Withdrawals	- 22,802.75
Total Account Value as of January 16, 2020	\$14,282.86

Interest Rate — The account value currently earns 4% except the account value equal to any policy loan earns 6%. The interest rates are effective annual interest rates.

Surrender Value as of January 16, 2020, will be \$14,282.86. The total account value has been reduced by the surrender charge of \$0.00 to determine the surrender value.

Note: If you request to surrender your policy, it cannot be reinstated.

Transaction details are provided in the Account Value Transactions portion of this notice.

Account Value Transactions

Date	Payments/ (Withdrawals)	Interest Credited	Expense Charges	Cost of Insurance	Ending Account Value
Balance from 2019 Annual Notice					\$34,959.44
01-16-2019	-	-	5.00	53.64	34,900.80
02-11-2019	175.00	-	8.75	-	35,067.05
02-16-2019	-	150.02	5.00	53.61	35,158.46
03-11-2019	175.00	-	8.75	-	35,324.71
03-16-2019	-	150.87	5.00	53.58	35,417.00
04-09-2019	175.00	-	8.75	-	35,583.25
04-11-2019	(22,802.75)	-	-	-	12,780.50
04-16-2019	-	135.20	5.00	53.56	12,857.14
05-16-2019	-	42.09	5.00	53.56	12,840.67
05-17-2019	175.00	-	8.75	-	13,006.92
06-11-2019	175.00	-	8.75	-	13,173.17
06-16-2019	-	42.62	5.00	53.52	13,157.27
07-09-2019	175.00	-	8.75	-	13,323.52
07-16-2019	-	43.18	5.00	53.51	13,308.19
08-09-2019	175.00	-	8.75	-	13,474.44
08-16-2019	-	43.67	5.00	53.49	13,459.62
09-10-2019	175.00	-	8.75	-	13,625.87
09-16-2019	-	44.15	5.00	53.47	13,611.55
10-09-2019	175.00	-	8.75	-	13,777.80
10-16-2019	-	44.67	5.00	53.45	13,764.02
11-11-2019	175.00	-	8.75	-	13,930.27
11-16-2019	-	45.13	5.00	53.44	13,916.96
12-10-2019	175.00	-	8.75	-	14,083.21
12-16-2019	-	45.65	5.00	53.42	14,070.44
01-09-2020	175.00	-	8.75	-	14,236.69
Totals	-\$20,702.75	\$787.25	\$165.00	\$642.25	\$14,236.69*

* Does not reflect interest to be earned January 16, 2020.



Loan Transactions

Date	Increase	Repayment	Interest	Decrease	Balance
04-09-2019	-	22,802.75	407.42	22,395.33	-
Totals	\$0.00	\$22,802.75	\$407.42	\$22,395.33	\$0.00

Information and Service

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- All amounts shown are subject to verification.
- When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.
- Under the tax law, certain events during the life of a life insurance policy may be taxable to the policyowner. The following may result in taxable income: partial withdrawals, policy surrenders, lapses, assignments, as well as loans from policies that are MECs (Modified Endowment Contracts). If an event is taxable, generally the amount the policyowner is taxed on is the "gain" in the policy. The gain usually is the policy's account value less the premiums paid. Once a taxable gain is reported, it cannot be changed. Please contact your tax advisor for additional information.
- **IMPORTANT POLICY OWNER NOTICE** - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by calling your agent at 425-747-3600, by calling State Farm Insurance at 855-534-0227, or by writing to the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

State Farm Life Insurance Company (Not Licensed in MA, NY, or WI)
 State Farm Life and Accident Assurance Company (Licensed in NY and WI)
 Bloomington, IL



STATE FARM LIFE INSURANCE COMPANY

HOME OFFICE, ONE STATE FARM PLAZA, BLOOMINGTON, ILLINOIS 61710



ST-0303-0000

Important Information About Your Life Insurance Policy

The following notice is required under New Hampshire law.

Any of the following actions related to your life insurance policy may have significant future financial, tax or other implications:

- a. Surrender of the policy;
- b. Lapse of the policy;
- c. Failure to pay premium;
- d. Application of the equity of the policy toward payment of premium;
- e. Application of accumulated dividends toward payment of premium;
- f. Financing premium payments;
- g. Sale of the policy; and
- h. Assignment of the policy and any right under the policy.

Before you act, you need to consider all options carefully and seek advice from a licensed financial advisor, attorney or other professional who can explain all available options and consequences.

If you have questions about this notice or your policy, please contact customer service at 855-534-0227.



State Farm Life Insurance Company
PO Box 2364
BLOOMINGTON, IL 61702-2364
Phone: 855-534-0227



L000039
WILLIAM T WHITMAN



ST-0103-0000

Annual Notice

Policy Number:	LF-1853-4088
Plan:	Universal Life
Insured:	WILLIAM T WHITMAN

Agent Tim Crabtree
1 Lake Bellevue Dr Ste 102
Bellevue, WA 98005-2417
Phone: 425-747-3600

Important Next Steps

- Review this document closely to make sure this policy continues to meet your needs.
- Universal Life policies are flexible and change from year to year based on interest rates, payments, and other factors. Contact your State Farm agent to review your policy and options available to you.

Thanks for letting us serve you!



For you and for them.

Count on us to help protect you, your loved ones and the life you've built. Like a good neighbor, State Farm is there[®].

TP09



Policy Information

Policy Number
LF-1853-4088

Policy Date
January 16, 2001

Payment Information
\$175.00 via the State Farm Payment Plan.

Insured
WILLIAM T WHITMAN

Plan
Universal Life

Any payment received after January 15, 2021, is not reflected on this notice.

This notice reflects activity from January 16, 2020, to January 16, 2021.

Beneficiary Information

The beneficiary designation is an important part of your policy. Your beneficiary designation is:

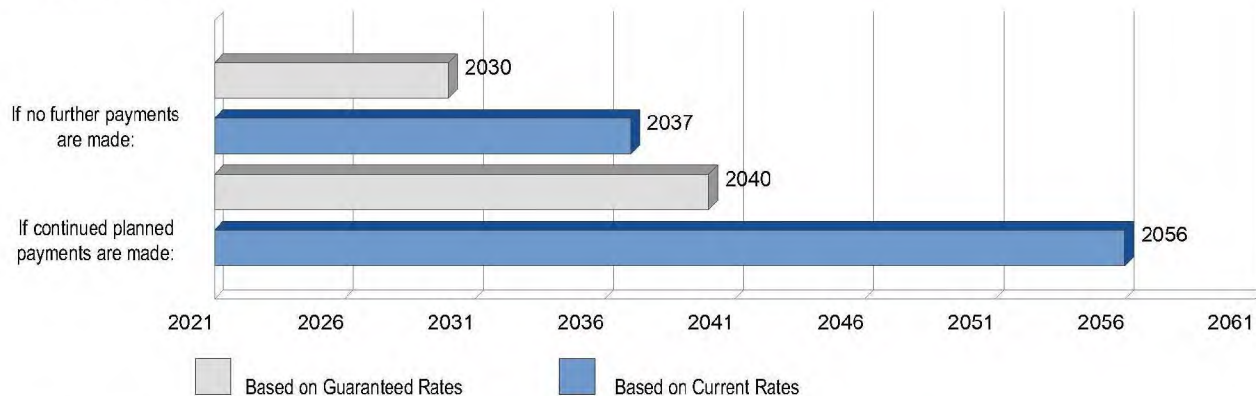
Primary: STEPHANIE ALICE WHITMAN
Successor: THOMAS HENRY WHITMAN (FATHER), RANDALL DEAN MAY

Note: Probate laws may disqualify a policy owner's former spouse from receiving life insurance proceeds. You should update your beneficiary designation if your marital status changes and you want your former spouse to receive the proceeds of this policy.

Insurance Information

Insurance Amount	Insured
Universal Life	\$474,197.00
Cost of Insurance	
Universal Life	\$679.16

Coverage Projection



If no further payments are made, your policy will provide coverage until April 17, 2030, when the insured's age is 49, based on guaranteed rates, and until August 15, 2037, when the insured's age is 56, based on current rates.

If continued planned payments of \$175.00 each month are made, your policy will provide coverage until October 15, 2040, when the insured's age is 59, based on guaranteed rates, and until February 14, 2056, when the insured's age is 75, based on current rates.

The age(s) shown above are based on the insured's age as of the policy anniversary preceding the projected coverage end date.

Account Value

ST
0203-0000

Balance from 2020 Annual Notice	\$14,282.86
Increases	
Payments	2,100.00
Interest Credited	540.65
Interest to be Earned January 16, 2021	52.16
Decreases	
Expense Charges	- 165.00
Cost of Insurance	- 679.16
Total Account Value as of January 16, 2021	\$16,131.51

Interest Rate — The account value currently earns 4% except the account value equal to any policy loan earns 6%. The minimum interest rate earned is 4%. The interest rates are effective annual interest rates.

Surrender Value as of January 16, 2021, will be \$16,131.51. The total account value has been reduced by the surrender charge of \$0.00 to determine the surrender value.

Note: If you request to surrender your policy, it cannot be reinstated.

Transaction details are provided in the Account Value Transactions portion of this notice.

Account Value Transactions

Date	Payments/ (Withdrawals)	Interest Credited	Expense Charges	Cost of Insurance	Ending Account Value
Balance from 2020 Annual Notice					\$14,282.86
01-16-2020	-	-	5.00	56.70	14,221.16
02-11-2020	175.00	-	8.75	-	14,387.41
02-16-2020	-	46.63	5.00	56.68	14,372.36
03-10-2020	175.00	-	8.75	-	14,538.61
03-16-2020	-	47.14	5.00	56.66	14,524.09
04-09-2020	175.00	-	8.75	-	14,690.34
04-16-2020	-	47.65	5.00	56.64	14,676.35
05-11-2020	175.00	-	8.75	-	14,842.60
05-16-2020	-	48.12	5.00	56.63	14,829.09
06-09-2020	175.00	-	8.75	-	14,995.34
06-16-2020	-	48.65	5.00	56.61	14,982.38
07-09-2020	175.00	-	8.75	-	15,148.63
07-16-2020	-	49.16	5.00	56.59	15,136.20
08-11-2020	175.00	-	8.75	-	15,302.45
08-16-2020	-	49.62	5.00	56.57	15,290.50
09-09-2020	175.00	-	8.75	-	15,456.75
09-16-2020	-	50.16	5.00	56.55	15,445.36
10-09-2020	175.00	-	8.75	-	15,611.61
10-16-2020	-	50.67	5.00	56.53	15,600.75
11-10-2020	175.00	-	8.75	-	15,767.00
11-16-2020	-	51.16	5.00	56.51	15,756.65
12-09-2020	175.00	-	8.75	-	15,922.90
12-16-2020	-	51.69	5.00	56.49	15,913.10
01-11-2021	175.00	-	8.75	-	16,079.35
Totals	\$2,100.00	\$540.65	\$165.00	\$679.16	\$16,079.35*

* Does not reflect interest to be earned January 16, 2021.



Information and Service

- If you have moved, please contact your State Farm Agent or visit statefarm.com® to change your address.
- All amounts shown are subject to verification.
- When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.
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